

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Laguna Residents First		Date of This Filing 9/29/2022	Date Stamp RECEIVED SEP 29 2022 City Clerk's Office City of Laguna Beach CA	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1421491	Report No. 1		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Laguna Beach	STATE CA	ZIP CODE 92651	No. of Pages 1	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
				An Ordinance Creating an Overlay Zoning District and Requiring Voter Approv			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
				Q	Laguna Beach	Yes	

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
9/29/2022	Charles Michael Murray, [REDACTED] Laguna Beach CA 92651 www.LagunaResidentsFirst.org website	\$ 1,750.00

Reason for Amendment _____