

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Laguna Residents First			Date of This Filing <u>10/20/2022</u>	Date Stamp	CALIFORNIA FORM 496 For Official Use Only RECEIVED OCT 20 2022 City Clerk's Office City of Laguna Beach, CA
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1421491		Report No. <u>4</u>		
STREET ADDRESS [REDACTED]			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Laguna Beach	STATE CA	ZIP CODE 92651	No. of Pages <u>1</u>		

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 District and Requiring Voter Approval			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER Q	JURISDICTION Laguna Beach	SUPPORT Yes	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/19/2022	Strumwasser & Woocher LLP, 10940 Wilshire Boulevard, Suite 2000, Los Angeles CA 90024 Legal services	\$ 4,882.50

Reason for Amendment _____