

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Laguna Residents First		Date of This Filing <u>11/3/2022</u>	Date Stamp	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1421491	Report No. <u>7</u>	RECEIVED	
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	NOV 03 2022	
CITY Laguna Beach	STATE CA		ZIP CODE 92651	By Clerk's Office Laguna Beach, CA
		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	JURISDICTION	SUPPORT	OPPOSE
				Q	Laguna Beach	Yes	

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
11/3/2022	Firebrand Media LLC 900 Glenneyre Street Suite B Laguna Beach CA 92651 Newspaper ads	\$ 3,740.00

Reason for Amendment _____