496 Independe	nt Expenditure F	Report		Amounts r	may be rounded to whole dollars.	*				
NAME OF FILER Advocates for Laguna Residents					Date of 10-15-24 This Filing	Date Stamp	CALIFORNIA 496			
AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable)				RECEIVED						
STREET ADDRESS  CITY  Laguna Beach		STATE ZIP CODE  CA 92651			Amendment to Report No	OCT 1 4 2024 City Clerk's Office ty of Laguna Beach, CA				
ECHHARIS MANTECUANICAL PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS OF	andidate or Ballot Me	0.5000	72001							
NAME OF CANDIDATE SUPPORTED OR OPPOSED  George Weiss				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED						
OFFICE SOUGHT OR H		DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION		SUPPORT	OPPOSE	
2. Independent Ex	penditures Made Attacl	n additional inform	ation on appro	opriately lab	eled continuation sheets.		*			
DATE			DE	SCRIPTION (	OF EXPENDITURE			AMOUNT		
10-12-2024	Printing expenses	Printing expenses to Day & Nite Printing, 20268 Carrey Rd. Walnut, CA91789					\$1,145			
Advertising expenses to Firebrand Media, 900 Glenneyre St Suite B, Laguna Beach, CA 92651, for advertising in the Laguna Beach Independent					\$1,200					
				i <u>e</u>						
					~	9				
Reason for Amendmen	ıt						•			

## 496 Independent Expenditure Report

CALIFORNIA Z 9 6	
FORM 199	
 I.D. NUMBER (if applicable)	

NAME OF FILER	I.D. NUMBER (if applicable)
Advocates for Laguna Residents	1455392

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
10-2-24	Joy Berry  Laguna Reach. CA 92651	IND COM OTH PTY SCC	Self-Employed, Hospitality	200.	If loan, enter interest rate, if any
10-3-24	Chris Catsimanes  Laguna Beach. CA 92651	IND COM OTH PTY SCC	Retired	999.	If loan, enter interest rate, if any %
10-7-24	Joy Berry  Laguna Beach, CA 92651	IND COM OTH PTY SCC	Self-Employed, Hospitality	300.	If loan, enter interest rate, if any %
		IND COM OTH PTY SCC			If loan, enter interest rate, if any %
		IND   COM   OTH   PTY   SCC			If loan, enter interest rate, if any
		IND COM OTH PTY SCC			If loan, enter interest rate, if any ————————————————————————————————————

<sup>\*</sup>Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

\*\* Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)
OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 496 (Feb/2019) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov