

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

| | | | | | |
|--|--|--|-------------------|--|---|
| NAME OF FILER Santa Monicans for Renters' Rights | | Date of This Filing 11/01/2018 | Date Stamp | <div style="border: 2px solid red; padding: 5px; color: red; font-weight: bold;"> E-Filed 11/01/2018 17:39:47 Filing ID: 174653427 </div> | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER (213) 489-4792 | I.D. NUMBER (if applicable) 790178 | Report No. 97 | | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | | |
| CITY Long Beach | STATE CA | ZIP CODE 90802 | | | |
| | | No. of Pages 2 | | | |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|---|---------------------|----------------|---------------|--|---------------------|----------------|---------------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED | | | |
| | | | | SMS | | | |
| OFFICE SOUGHT OR HELD | DISTRICT NO. | SUPPORT | OPPOSE | BALLOT NO./LETTER | JURISDICTION | SUPPORT | OPPOSE |
| | | | | SMS | Santa Monica | X | |

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

| DATE | DESCRIPTION OF EXPENDITURE | AMOUNT |
|------------|--|--------|
| 10/30/2018 | Postage & Mailing Services Cumulative to date total \$5476.51 | 82.06 |
| 10/30/2018 | Printing Cumulative to date total \$5476.51 | 27.44 |
| 10/30/2018 | Design Cumulative to date total \$5476.51 | 8.12 |
| 10/30/2018 | Data/Mail File Cumulative to date total \$5476.51 | 5.23 |

Reason for Amendment: _____

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CALIFORNIA
FORM **496**

NAME OF FILER

Santa Monicans for Renters' Rights

I.D. NUMBER (If applicable)

790178

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 |
|---------------|---|---|---|-----------------|---|
| 10/21/2018 | Edward Pendyk Santa Monica, CA 90401 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Owner Ametel Inc. | 99.00 | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |

*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
- PTY – Political Party
- SCC – Small Contributor Committee