

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER SAN FRANCISCO PARENT POLITICAL ACTION COMMITTEE			Date of This Filing <u>02/07/2019</u>		Date Stamp		CALIFORNIA FORM 496	
AREA CODE/PHONE NUMBER (415) 732-7700		I.D. NUMBER (if applicable) 1330472	Report No. <u>G18-PAR-15</u>		E-Filed 02/07/2019 10:28:50 Filing ID: 176504657		For Official Use Only	
STREET ADDRESS			<input checked="" type="checkbox"/> Amendment to Report No. <u>G18-PAR-15</u> <small>(explain below)</small>					
CITY SAN FRANCISCO	STATE CA	ZIP CODE 94108	No. of Pages <u>2</u>					

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED CHRISTINE JOHNSON				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD BOARD OF SUPERVISORS: SAN FRANCISCO District 6	DISTRICT NO. 6	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
11/05/2018	WEB Cumulative to date total \$1627.21	500.00
11/05/2018	TEL Cumulative to date total \$1627.21	460.54

Reason for Amendment: Amend Amount

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CALIFORNIA
FORM **496**

NAME OF FILER
SAN FRANCISCO PARENT POLITICAL ACTION COMMITTEE

I.D. NUMBER (If applicable)
1330472

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
10/23/2018	RENEE DIRESTA SAN FRANCISCO, CA 94105	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RESEARCHER NEW KNOWLEDGE	1,000.00	If loan, enter interest rate, if any _____%
10/31/2018	SAFE & AFFORDABLE SAN FRANCISCO SACRAMENTO, CA 95815 Committee ID# 1400471	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		15,000.00	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