

496 Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER SANTA CLARA POLICE ASSN PAC	Date Stamp RECEIVED OCT 23 2008 City Clerk's Office City of Santa Clara	Date of This Filing 10/23/08	Report No. 3	CALIFORNIA 496 FORM For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1266738	<input type="checkbox"/> Amendment to Report No. (explain below)		
STREET ADDRESS [REDACTED]	STATE CA	No. of Pages 1		
CITY SANTA CLARA	ZIP CODE 95052			

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED KEVIN MOORE	NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED		
OFFICE SOUGHT OR HELD SANTA CLARA CITY COUNCIL	DISTRICT NO.	SUPPORT X	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	SUPPORT	OPPOSE	AMOUNT
10/23/08	MAILING	X		1333.33

Reason for Amendment: _____

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NAME OF FILER SANTA CLARA POLICE ASSOC PAC		Date Stamp RECEIVED OCT 23 2008 City Clerk's Office City of Santa Clara	
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1266738	Date of This Filing 10/23/08	CALIFORNIA FORM 496 For Official Use Only
STREET ADDRESS [REDACTED]		Report No. 2	
CITY SANTA CLARA CA	STATE CA	<input type="checkbox"/> Amendment to Report No. (explain below)	
ZIP CODE 95052		No. of Pages 1	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED		NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED	
OFFICE SOUGHT OR HELD SANTA CLARA CITY COUNCIL	NAME OF CANDIDATE SUPPORTED OR OPPOSED JARVE MATTHEWS	BALLOT NO./LETTER	JURISDICTION SUPPORT OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/23/08	TRAINING	1,333.33

Reason for Amendment: _____

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496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER SANTA CLARA POLICE ASSOC. PAC		CALIFORNIA FORM 496 For Official Use Only	
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1266738	Date of This Filing 10/23/08	Date Stamp RECEIVED OCT 23 2008 City Clerk's Office City of Santa Clara
STREET ADDRESS [REDACTED]		Report No. 1	
CITY SANTA CLARA	STATE CA	<input type="checkbox"/> Amendment to Report No. (explain below)	
	ZIP CODE 95052	No. of Pages 1	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED CHUCK BLAIR	NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED		
OFFICE SOUGHT OR HELD CITY COUNCIL	DISTRICT NO.	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
10/23/08	MAILING	1,333.34

Reason for Amendment: