

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Palm Springs Fire Safety Association PAC		Date of This Filing 10/29/19	Date Stamp <b>RECEIVED</b> CITY OF PALM SPRINGS  2019 OCT 30 AM 10:47  OFFICE OF THE CITY CLERK	<b>CALIFORNIA FORM 496</b> For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 881536	Report No. _____		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Palm Springs	STATE CA	ZIP CODE 92262	No. of Pages 1	

## 1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Geoff Kors				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council	DISTRICT NO. 3	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/29/19	Billboard endorsement.	566.66

Reason for Amendment \_\_\_\_\_