

# 496 24-HOUR INDEPENDENT EXPENDITURE REPORT

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

LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER CALIFORNIA TAXPAYER PROTECTION COMMITTEE			<b>Date of This Filing</b> <u>10/15/2020</u>	Date Stamp	<b>CALIFORNIA FORM 496</b> For Official Use Only  <b>RECEIVED CITY CLERK</b> <b>10/15/2020</b>
AREA CODE/PHONE NUMBER (530) 346-4246	I.D. NUMBER (if applicable) 1287571		<b>Report No.</b> <u>14OCT20 - 1</u>		
STREET ADDRESS 9971 BASE LINE ROAD			<input type="checkbox"/> <b>Amendment to Report No.</b> <u>000</u> <small>(explain below)</small>		
CITY ELVERTA	STATE CA	ZIP CODE 956269411	<b>No. of Pages</b> <u>2</u>		

## 1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Sandy (Sanford) Davidson			NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD/DISTRICT NO. Office Held: Other: Palos Verdes Estates City Council	SUPPORT	OPPOSE X	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/14/2020 - 10/14/2020	Designed, produced, and mailed a flyer in opposition to Sandy Davidson	2261.04

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

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**CALIFORNIA**  
**FORM** **496**

NAME OF FILER  
CALIFORNIA TAXPAYER PROTECTION COMMITTEE

I.D. NUMBER (if applicable)  
1287571

### 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
10/13/2020 - 10/13/2020	Pivot Strategies 108 Saddle Rock Court Roseville, CA 95747	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,500.00	If loan, enter interest rate, if any 0 _____%
		<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

FPPC Form 496 (June/01)  
 FPPC Toll-Free Helpline: 866/ASK-FPPC  
 866/275-3772