

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Central Valley Victory PAC		<b>Date of This Filing</b> <u>11/02/2022</u>		<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (628) 899-6180	<b>I.D. NUMBER (if applicable)</b> 1441612	<b>Report No.</b> <u>VA-G22-200</u>		
<b>STREET ADDRESS</b> 393 7th Avenue, Suite 301		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> San Francisco	<b>STATE</b> CA	<b>ZIP CODE</b> 94118		<b>No. of Pages</b> <u>2</u>

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> DAN EVANS				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD</b> City Council Member CITY OF TRACY	<b>DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b> X	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/28/2022	IND EXP OF CAMPAIGN LITERATURE. Cumulative to date total \$17502.61	4,631.57

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

# 496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA FORM 496**

I.D. NUMBER (If applicable)

1441612

NAME OF FILER  
Central Valley Victory PAC

### 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
10/24/2022	PAC+ 1333 H STREET NW WASHINGTON, DC 20005 Committee ID# 1353459	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		43,800.00	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

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Central Valley Victory PAC		Date of This Filing <u>11/02/2022</u>		<b>CALIFORNIA FORM 496</b> For Official Use Only
AREA CODE/PHONE NUMBER (628) 899-6180	I.D. NUMBER (if applicable) 1441612	Report No. <u>VA-G22-199</u>		
STREET ADDRESS 393 7th Avenue, Suite 301		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY San Francisco	STATE CA	ZIP CODE 94118		
		No. of Pages <u>1</u>		

## 1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED ALICE ENGLISH				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member CITY OF TRACY	DISTRICT NO.	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
10/22/2022	IND EXP OF CAMPAIGN LITERATURE. Cumulative to date total \$3169.75	3,169.75

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

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Central Valley Victory PAC		Date of This Filing <u>11/02/2022</u>		<b>CALIFORNIA FORM 496</b> For Official Use Only
AREA CODE/PHONE NUMBER (628) 899-6180	I.D. NUMBER (if applicable) 1441612	Report No. <u>VA-G22-198</u>		
STREET ADDRESS 393 7th Avenue, Suite 301		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY San Francisco	STATE CA	ZIP CODE 94118		No. of Pages <u>1</u>

## 1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED ELEASSIA DAVIS				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD Mayor CITY OF TRACY	DISTRICT NO.	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
10/22/2022	IND EXP OF CAMPAIGN LITERATURE. Cumulative to date total \$3169.75	3,169.75

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

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Central Valley Victory PAC		<b>Date of This Filing</b> 11/02/2022		<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (628) 899-6180	<b>I.D. NUMBER (if applicable)</b> 1441612	<b>Report No.</b> VA-G22-197		
<b>STREET ADDRESS</b> 393 7th Avenue, Suite 301		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> San Francisco	<b>STATE</b> CA	<b>ZIP CODE</b> 94118		<b>No. of Pages</b> 1

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> DAN EVANS				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD</b> City Council Member CITY OF TRACY	<b>DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b> X	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

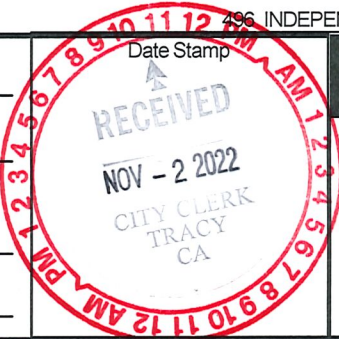
## 2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/22/2022	IND EXP OF CAMPAIGN LITERATURE. Cumulative to date total \$12871.04	3,169.75

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

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

<b>NAME OF FILER</b> Central Valley Victory PAC		<b>Date of This Filing</b> 11/02/2022	Date Stamp 	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (628) 899-6180	<b>I.D. NUMBER (if applicable)</b> 1441612	<b>Report No.</b> VA-G22-194		
<b>STREET ADDRESS</b> 393 7th Avenue, Suite 301		<input type="checkbox"/> <b>Amendment to Report No.</b> (explain below)		
<b>CITY</b> San Francisco	<b>STATE</b> CA	<b>ZIP CODE</b> 94118	<b>No. of Pages</b> 2	

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> ELEASSIA DAVIS				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD</b> Mayor CITY OF TRACY	<b>DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b> X	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
11/01/2022	IND EXP OF CAMPAIGN LITERATURE. Cumulative to date total \$13431.77	7,095.36

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

# 496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA FORM 496**

NAME OF FILER  
Central Valley Victory PAC

I.D. NUMBER (If applicable)  
1441612

### 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
10/24/2022	PAC+ 1333 H STREET NW WASHINGTON, DC 20005 Committee ID# 1353459	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		43,800.00	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

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Central Valley Victory PAC			<b>Date of This Filing</b> <u>10/31/2022</u>			<b>CALIFORNIA FORM 496</b> For Official Use Only		
<b>AREA CODE/PHONE NUMBER</b> (628) 899-6180		<b>I.D. NUMBER (if applicable)</b> 1441612		<b>Report No.</b> <u>VA-G22-183</u>				
<b>STREET ADDRESS</b> 393 7th Avenue, Suite 301							<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)	
<b>CITY</b> San Francisco			<b>STATE</b> CA	<b>ZIP CODE</b> 94118			<b>No. of Pages</b> <u>2</u>	

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> ELEASSIA DAVIS				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>					
<b>OFFICE SOUGHT OR HELD</b> Mayor CITY OF TRACY		<b>DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b> X	<b>BALLOT NO./LETTER</b>		<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/31/2022	IND EXP OF PHONE BANKING OPPOSING E DAVIS FOR MAYOR, CITY OF TRACY. Cumulative to date total \$3166.66	3,166.66

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



# 496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA FORM 496**

NAME OF FILER  
Central Valley Victory PAC

I.D. NUMBER (if applicable)  
1441612

### 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
10/24/2022	PAC+ 1333 H STREET NW WASHINGTON, DC 20005 Committee ID# 1353459	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		43,800.00	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 _____%

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**\*\*Contributor Codes**  
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 PTY – Political Party  
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<b>NAME OF FILER</b> Central Valley Victory PAC			<b>Date of This Filing</b> <u>10/31/2022</u>			<b>CALIFORNIA FORM 496</b> For Official Use Only		
<b>AREA CODE/PHONE NUMBER</b> (628) 899-6180		<b>I.D. NUMBER (if applicable)</b> 1441612		<b>Report No.</b> <u>VA-G22-182</u>				
<b>STREET ADDRESS</b> 393 7th Avenue, Suite 301							<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)	
<b>CITY</b> San Francisco		<b>STATE</b> CA	<b>ZIP CODE</b> 94118				<b>No. of Pages</b> <u>2</u>	

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> DAN EVANS				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>					
<b>OFFICE SOUGHT OR HELD</b> City Council Member CITY OF TRACY		<b>DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b> X	<b>BALLOT NO./LETTER</b>		<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/31/2022	IND EXP OF PHONE BANKING OPPOSING D EVANS FOR CITY COUNCIL, CITY OF TRACY. Cumulative to date total \$12867.96	3,166.67

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

# 496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA FORM 496**

I.D. NUMBER (if applicable)

1441612

NAME OF FILER  
Central Valley Victory PAC

### 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
10/24/2022	PAC+ 1333 H STREET NW WASHINGTON, DC 20005 Committee ID# 1353459	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		43,800.00	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 _____%

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 PTY – Political Party  
 SCC – Small Contributor Committee

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NAME OF FILER Central Valley Victory PAC		Date of This Filing <u>10/31/2022</u>		<b>CALIFORNIA FORM 496</b> For Official Use Only
AREA CODE/PHONE NUMBER (628) 899-6180	I.D. NUMBER (if applicable) 1441612	Report No. <u>VA-G22-181</u>		
STREET ADDRESS 393 7th Avenue, Suite 301		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY San Francisco	STATE CA	ZIP CODE 94118	No. of Pages <u>2</u>	

## 1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED ALICE ENGLISH				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member CITY OF TRACY	DISTRICT NO.	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
10/31/2022	IND EXP OF PHONE BANKING OPPOSING A ENGLISH FOR CITY COUNCIL, CITY OF TRACY. Cumulative to date total \$3166.67	3,166.67

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

# 496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA FORM 496**

NAME OF FILER  
Central Valley Victory PAC

I.D. NUMBER (If applicable)  
1441612

### 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
10/24/2022	PAC+ 1333 H STREET NW WASHINGTON, DC 20005 Committee ID# 1353459	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		43,800.00	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**  
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 COM – Recipient Committee (other than PTY or SCC)  
 OTH – Other  
 PTY – Political Party  
 SCC – Small Contributor Committee

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Central Valley Victory PAC		Date of This Filing <u>10/13/2022</u>		<b>CALIFORNIA FORM 496</b> For Official Use Only
AREA CODE/PHONE NUMBER (628) 899-6180	I.D. NUMBER (if applicable) 1441612	Report No. <u>VA-G22-128</u>		
STREET ADDRESS 393 7th Avenue, Suite 301		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY San Francisco	STATE CA	ZIP CODE 94118		

## 1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED DAN EVANS				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member CITY OF TRACY	DISTRICT NO.	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
10/13/2022	IND EXP OF CAMPAIGN LITERATURE Cumulative to date total \$9701.29	9,701.29

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