496 Independent Expenditure Report Amounts may be rounded to whole dollars. 2 3496 INDEPENDENT EXPENDITURE REPORT Date Stamp NAME OF FILER CALIFORNIA Date of This Filing $\frac{10/12/2024}{}$ Tracy Firefighters Association PAC **FORM** I.D. NUMBER (ifapplicable) AREA CODE/PHONE NUMBER For Official Use Only Report No. Davis-2 (916)706-2677 1230611 STREET ADDRESS ☐ Amendment 1127-11th Street, Suite 210 to Report No. (explain below) STATE ZIP CODE CITY No. of Pages CA 95814 Sacramento 1. List Only One Candidate or Ballot Measure NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED NAME OF CANDIDATE SUPPORTED OR OPPOSED Eleassia Davis OFFICE SOUGHT OR HELD DISTRICT NO. SUPPORT OPPOSE BALLOT NO./LETTER JURIS DICTION SUPPORT OPPOSE Mayor City of Tracy X 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets. AMOUNT DATE DESCRIPTION OF EXPENDITURE 10/11/2024 259.00 Newspaper Ad Cumulative to date total \$2338.93 Reason for Amendment: _

496 Independent	Expenditure Re	port	. А	mounts ma	y be round	led to whole dollars.	1 8 9 10 17 13 4960NDEPH	ENDENT EXPENDITURE	E REPORT
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1127-11th Street, Suit	e 210				to Repo	ort No	37		
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1. List Only One Cand	idate or Ballot Meası	ure							
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Alice English									
OFFICE SOUGHT OR HELD		DISTRICT NO.	SUPPORT	OPPOSE	7	BALLOT NO./LETTER	JURIS DICTION	SUPPORT	OPPOSE
City Council Member	City of Tracy		X						
2. Independent Expend	ditures Made Attach add	ditional informati	on on appropi	riately labele	d continuat	ion sheets.			
DATE			DES	SCRIPTION C	F EXPENDI	TURE		AMOUNT	
10/11/2024	Newspaper Ad Cumulative to date	total \$2117	.67						259.00
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Tracy Firefighters Ass	ociation PAC				This Filing 10/12/2024 RECEIVED				FORM	496
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AREA CODE/PHONE NUMBER			BER (ifapplicable)		Report No. Arriola-2	(2) (S	ECELVE	For Official Use (Only
(916)706-2677		1230	611		Report No.	V	OCT 12 2024		
STREET ADDRESS					☐ Amendment	200	OCT CLERK W		
1127-11th Street, Suit	e 210				to Report No	33	CITYRACY		
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1. List Only One Candi	date or Ballot Measure						1010		
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Dan Arriola									
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Mayor City of Tracy			X						
2. Independent Expend	litures Made Attach additio	nal informat	tion on appropri	iately labele	d continuation sheets.				
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Reason for Amendment: _								-	

496 Independent Expenditure Report Amounts may be rounded to whole dollars. 496 INDEPENDENT EXPENDITURE REPORT Date Stamp? NAME OF FILER CALIFORNIA Date of This Filing $\frac{10/12/2024}{}$ **FORM** Tracy Firefighters Association PAC I.D. NUMBER (ifapplicable) AREA CODE/PHONE NUMBER For Official Use Only Report No. Abercro-2 1230611 (916) 706-2677 STREET ADDRESS ☐ Amendment 1127-11th Street, Suite 210 to Report No. (explain below) STATE ZIP CODE No. of Pages 95814 CA Sacramento 1. List Only One Candidate or Ballot Measure NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED NAME OF CANDIDATE SUPPORTED OR OPPOSED Steve Abercrombie DISTRICT NO. SUPPORT OPPOSE BALLOT NO./LETTER JURIS DICTION SUPPORT OPPOSE OFFICE SOUGHT OR HELD City Council Member City of Tracy X 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets. AMOUNT DESCRIPTION OF EXPENDITURE DATE 259.00 10/11/2024 Newspaper Ad Cumulative to date total \$2117.67

Reason for Amendment: ____

Amounts may be rounded to whole dollars. 496 INDEPENDENT EXPENDITURE REPORT Date Stamp NAME OF FILER **CALIFORNIA** Date of This Filing ____09/17/2024 **FORM** Tracy Firefighters Association PAC AREA CODE/PHONE NUMBER I.D. NUMBER (ifapplicable) For Official Use Only Report No. English-1 1230611 (916) 706-2677 STREET ADDRESS ☐ Amendment 1127-11th Street, Suite 210 to Report No. (explain below) STATE **ZIP CODE** CITY No. of Pages CA 95814 Sacramento 1. List Only One Candidate or Ballot Measure NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED NAME OF CANDIDATE SUPPORTED OR OPPOSED Alice English OFFICE SOUGHT OR HELD DISTRICT NO. SUPPORT OPPOSE BALLOT NO./LETTER JURISDICTION SUPPORT OPPOSE City Council Member City of Tracy X 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets. **AMOUNT** DESCRIPTION OF EXPENDITURE 1,858.67 09/17/2024 Mailer Cumulative to date total \$1858.67 Reason for Amendment: _

496 Independent Expenditure Report Amounts may be rounded to whole dollars. 496 INDEPENDENT EXPENDITURE REPORT NAME OF FILER CALIFORNIA Date of 09/17/2024 Tracy Firefighters Association PAC This Filing __ FORM AREA CODE/PHONE NUMBER I.D. NUMBER (ifapplicable) For Official Use Only Report No. Davis-1 (916) 706-2677 1230611 STREET ADDRESS □ Amendment 1127-11th Street, Suite 210 to Report No. (explain below) STATE ZIPCODE No. of Pages _ CA 95814 Sacramento 1. List Only One Candidate or Ballot Measure NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED NAME OF CANDIDATE SUPPORTED OR OPPOSED Eleassia Davis OPPOSE JURISDICTION SUPPORT OFFICE SOUGHT OR HELD DISTRICT NO. SUPPORT BALLOT NO./LETTER OPPOSE Mayor City of Tracy X 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets. **AMOUNT DESCRIPTION OF EXPENDITURE** DATE 2,079.93 09/17/2024 Cumulative to date total \$2079.93 Reason for Amendment: _

Amounts may be rounded to whole dollars. 496 INDEPENDENT EXPENDITURE REPORT NAME OF FILER Date Stamp Date of **CALIFORNIA** This Filing ___09/17/2024 Tracy Firefighters Association PAC **FORM** I.D. NUMBER (ifapplicable) AREA CODE/PHONE NUMBER For Official Use Only Report No. Bedolla-1 1230611 (916) 706-2677 STREET ADDRESS ☐ Amendment 1127-11th Street, Suite 210 to Report No. (explain below) STATE **ZIP CODE** CITY No. of Pages CA 95814 Sacramento 1. List Only One Candidate or Ballot Measure NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED NAME OF CANDIDATE SUPPORTED OR OPPOSED Mateo Bedolla OFFICE SOUGHT OR HELD DISTRICT NO. SUPPORT OPPOSE BALLOT NO./LETTER JURISDICTION SUPPORT OPPOSE City Council Member City of Tracy X 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets. **AMOUNT** DESCRIPTION OF EXPENDITURE DATE 1,858.67 09/17/2024 Mailer Cumulative to date total \$1858.67 Reason for Amendment:

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AREA CODE/PHONE NUMB	ER	I.D. NUM	IBER (ifapplicable)				For Official Use Only
(916)706-2677		123	0611		Report No. Arriola-1		SEP 18 2024
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1127-11th Street,	Suite 210				to Report No		CITY ACY
CITY		STATE	ZIPCODE		(explain below)		Ch Ch
Sacramento		CA	95814		No. of Pages1		CO C T NO
1. List Only One C	andidate or Ballot Measure						
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Dan Arriola							
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Tracy Firefighters Association PAC		This Filing09/17/2024	Ship & See	FORM 490
AREA CODE/PHONE NUMBER	I.D. NUMBER (ifapplicable)	/,	RECEIVED 6	For Official Use Only
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1.	List Only	One	Candidate	or	Ballot	Measure	
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NAME OF CANDIDATE SUPPORTED OR OPPOSED			NAME OF BALLOT MEASURE SU	PPORTED OR OPPOSED			
Steve Abercrombie							
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
City Council Member City of Tracy		х					

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

Reason for Amendment: _____

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
09/17/2024	Mailer Cumulative to date total \$1858.67	1,858.67