

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Merced City Firefighters Political Action Committee		Date Stamp	CALIFORNIA FORM 496
AREA CODE/PHONE NUMBER 2092616107	I.D. NUMBER (if applicable) 891177	Date of This Filing <u>11/04/2022</u> Report No. <u>4</u>	For Official Use Only CITY OF MERCED NOV4'22PM4:36
STREET ADDRESS POBox2480 Merced		Amendment to Report No. _____ (explain below)	
STATE <u>CA</u> ZIP CODE <u>95344</u> No. of Pages <u>1</u>			

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Delray Shelton for City Council			
OFFICE SOUGHT OR HELD City Council	DISTRICT NO. 6	SUPPORT X	OPPOSE
NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED		BALLOT NO./LETTER	JURISDICTION
		SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
11/03/2022	Gowans Printing Company	\$1014.00

Reason for Amendment _____