** INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY **
TIME RECEIVED June 24, 2019 at 12:40:25 PM PDT
REMOTE CSID
DURATION 51
PAGES 2
STATUS Received
FAX No.
P. 001
JUN/24/2019/MON 12:34 PM

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER		Date of This Filing 06/24/2019	Date Stamp	CALIFORNIA FORM 496
East Bay Working Families, a coalition of unions and community groups			RECEIVED JUN 24 2019 CITY CLERK CITY OF EMERYVILLE	For Official Use Only
AREA CODE/PHONE NUMBER [redacted]	I.D. NUMBER (if applicable) 1390351	Report No. 29870		
STREET ADDRESS [redacted]		☐ Amendment to Report No. _____ (explain below)		
CITY [redacted]	STATE [redacted] ZIP CODE [redacted]	No. of Pages 2		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE

NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED: Referendum Against Minimum Wage Ordinance Amendment			
BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
TBD	City of Emeryville	X	

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
06/18/2019	On-line video Cumulative to date total $26474.19	3,449.41

Reason for Amendment: _____

496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

CALIFORNIA FORM **496**

NAME OF FILER: East Bay Working Families, a coalition of unions and community groups

I.D. NUMBER (If applicable): 1390351

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
06/21/2019	U.A. Local Union 342 of the United Association of Journeymen Plumbing and Steamfitters [redacted]	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		25,000.00	If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ 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

CITY OF EMERYVILLE
CITY CLERK
JUN 21 2019
RECEIVED