

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

**NAME OF FILER**  
 Napa-Solano County Labor & Working Families Political Action Committee,  
 Sponsored by Labor Organizations

**Date of This Filing** 11/01/2024



**CALIFORNIA FORM 496**

**AREA CODE/PHONE NUMBER**

**I.D. NUMBER (if applicable)**

[REDACTED]

1454547

**Report No.** Largaes1

For Official Use Only

**STREET ADDRESS**

**Amendment to Report No.** \_\_\_\_\_  
 (explain below)

**No. of Pages** 1

**CITY** Napa **STATE** CA **ZIP CODE** 94558

## 1. List Only One Candidate or Ballot Measure

**NAME OF CANDIDATE SUPPORTED OR OPPOSED**

Lionel Largaespada

**OFFICE SOUGHT OR HELD**

City Council Member City of Benicia

**DISTRICT NO.**

**SUPPORT**

**OPPOSE**

X

**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
10/24/2024	Mailer Cumulative to date total \$2704.90	2,704.90

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