

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

Date Stamp

CALIFORNIA FORM **496**

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)

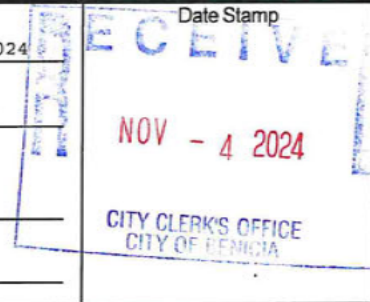
Report No. Macenski2

For Official Use Only

STREET ADDRESS

Amendment to Report No. _____
(explain below)

No. of Pages 1



CITY STATE ZIP CODE
Napa CA 94558

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED

Trevor Macenski

NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED

OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE
City Council Member City of Benicia		X	

BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/29/2024	Digital Ads Cumulative to date total \$4704.90	2,000.00

Reason for Amendment: _____