

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Alliance for Responsible Environmental Solutions, supporting Masnada, Martin, Cooper, Orzechowski, Schroeder, and Petersen for the 2024 Santa Clarita Water Board			Date of This Filing <u>10/14/2024</u>	Date Stamp <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;"> E-Filed 10/14/2024 13:16:38 Filing ID: 212302660 </div>	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (916)442-7757	I.D. NUMBER (if applicable) 1454224		Report No. <u>SM#2DM</u>		
STREET ADDRESS _____			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Pasadena	STATE CA	ZIP CODE 91104	No. of Pages <u>2</u>		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Dan Masnada				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED _____			
OFFICE SOUGHT OR HELD Member, Board of Directors: SCVW Agency, Division 1	DISTRICT NO. _____	SUPPORT X	OPPOSE _____	BALLOT NO./LETTER _____	JURISDICTION _____	SUPPORT _____	OPPOSE _____

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/14/2024	Slate Mailer Cumulative to date total \$6778.16	2,227.16

Reason for Amendment: _____

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CALIFORNIA
FORM **496**

NAME OF FILER
Alliance for Responsible Environmental Solutions, supporting Masnada, Martin, Cooper, Orzechowski, Schroeder, and Petersen for the 2024 Santa Clarita Water Board

I.D. NUMBER (If applicable)

1454224

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
10/11/2024	C.F. Engineering Contractor Castaic, CA 91384	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00	If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> 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