

Late Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Headlands Reserve LLC		Date of This Filing 10/29/04	Date Stamp	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 949-488-8800	I.D. NUMBER (if applicable)	Report No. _____		
STREET ADDRESS 24849 Del Prado		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Dana Point	STATE CA	ZIP CODE 92629	No. of Pages _____	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
Joe Snyder							
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
Dana Point City Council		X					

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/28/04	Phone bank	1242.00

Reason for Amendment: _____