

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Committee to Elect Carlos Duran for IID Division 1, 2026 AREA CODE/PHONE NUMBER [REDACTED] STREET ADDRESS [REDACTED] CITY [REDACTED]	I.D. NUMBER (if applicable) 1489251	Date of This Filing 5/26/26 Report No. 006 <input type="checkbox"/> Amendment to Report No. (explain below) No. of Pages 1	Date Stamp Register of Voters MAY 26 2026 Imperial County	CALIFORNIA FORM 496 For Official Use Only
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1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Carlos Duran	NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED		
OFFICE SOUGHT OR HELD IID Division 1 - 2026	DISTRICT NO. 1	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
5/25/26	Vision Marketing Services (Campaign advertising in Spanish Media (ch66))	\$ 100.00 \$4,516.00

Reason for Amendment _____