

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED
CITY CLERK

497 CONTRIBUTION REPORT

| | | | | |
|---|---|--|---|---|
| NAME OF FILER Mansoor for City Council 2016 | | Date of This Filing <u>08/12/2016</u> | Date Stamp 16 AUG 12 AM 11:15 CITY OF COSTA MESA BY _____ | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER (714) 540-2295 | I.D. NUMBER (if applicable) 1385155 | Report No. <u>16-1</u> | | |
| STREET ADDRESS 2973 Harbor Blvd #571 | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Costa Mesa | STATE CA | ZIP CODE 92626 | No. of Pages <u>1</u> | |

1. Contribution(s) 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 |
|---------------|---|---|---|---|
| 08/12/2016 | S Rahimian Management Co 1900 Newport Blvd Costa Mesa, CA 92627 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |

Reason for Amendment: _____

*Contributor Codes
 IND – Individual
 COM – Recipient Committee (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee