

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED
CITY CLERK

497 CONTRIBUTION REPORT

NAME OF FILER Lee Ramos for Costa Mesa City Council 2016		Date of This Filing <u>08/18/2016</u>	Date Stamp 16 AUG 18 AM 11:33	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER <u>(710) 510-6388</u>	I.D. NUMBER (if applicable) <u>1361842</u>	Report No. <u>16-1</u>	CITY OF COSTA MESA BY	
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <u>Costa Mesa</u>	STATE <u>CA</u>	ZIP CODE <u>92627</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
08/18/2016	Steve Mensinger for Costa Mesa City Council 2016 603 E Alton Ave Ste G Santa Ana, CA 92705 Committee ID # 1348110	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,457.61 <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