

RECEIVED
CITY CLERK

20 SEP 28 AM 8:19

CITY OF COSTA MESA
BY gjf

497 Contribution Report

Amounts may be rounded to whole dollars.

| | | | | |
|--|--|---|-------------------|---|
| NAME OF FILER Stephens for Costa Mesa D1 - 2020 | | Date of This Filing 09/25/20 | Date Stamp | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER 714-434-7852 | I.D. NUMBER (if applicable) Pending | Report No. 13 | | |
| STREET ADDRESS 2004 N. Capella Ct | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages 1 | | |
| CITY Costa Mesa | STATE CA | | ZIP CODE 92626 | |

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 |
|---------------|--|--|---|---|
| 09/24/20 | Costa Mesa Fire Association Loc#1465 PAC# 1377067 2001 Harbor Blvd, Suite 240 Costa Mesa, CA 92627 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | In-Kind contribution | 2,000.00 <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