

497 Contribution Report

Amounts may be rounded to whole dollars.

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CITY OF COSTA MESA
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497 CONTRIBUTION REPORT

NAME OF FILER Gameros for Costa Mesa Council District 2 in 2020			Date of This Filing 09/29/2020	<div> CALIFORNIA FORM 497 </div> <div> For Official Use Only </div>
AREA CODE/PHONE NUMBER (714) 496-5500	I.D. NUMBER (if applicable) 1426477		Report No. 2020-6	
STREET ADDRESS 1300 Belfast Avenue			<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Costa Mesa	STATE CA	ZIP CODE 92626	No. of Pages 1	

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
09/28/2020	Costa Mesa Firefighters Assn Local 1465 PAC 2001 Harbor Blvd, Ste 240 Costa Mesa, CA 92627 Committee ID # 1377067 INKIND	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,097.17 <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

*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

Reason for Amendment: _____