

# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED  
CITY CLERK

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Harper for City Council 2020		<b>Date of This Filing</b> 10/14/2020	<b>Date Stamp</b> 20 OCT 14 PM 5: 2	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (714) 863-3574	<b>I.D. NUMBER (if applicable)</b> 1430436	<b>Report No.</b> 20-6		
<b>STREET ADDRESS</b> 3061 Capri Ln		<input type="checkbox"/> <b>Amendment to Report No.</b> (explain below)	<b>CITY OF COSTA MESA</b> BY [REDACTED]	
<b>CITY</b> Costa Mesa	<b>STATE</b> CA			

## 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
10/14/2020	Farid Harrison [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Green Firefly LLC	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

**\*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: \_\_\_\_\_