

# 497 Contribution Report

Amounts may be rounded to whole dollars.

|   |   |   |  |   |
|---|---|---|--|---|
| NAME OF FILER<br><b>Committee to Recall Council Member Herb Perez</b> |   | Date of This Filing<br><b>10/30/2019</b>                                  | Date Stamp<br><b>CITY OF FOSTER CITY</b><br><b>EMID</b><br><b>19 OCT 31 AM 9:14</b><br><b>RECEIVED</b> | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| AREA CODE/PHONE NUMBER<br>[REDACTED]                                  | I.D. NUMBER (if applicable)<br><b>1418889</b> | Report No. _____  |  |   |
| STREET ADDRESS<br>[REDACTED]  |   | <input type="checkbox"/> Amendment to Report No. _____<br>(explain below) |  |   |
| CITY<br><b>Foster city</b>  | STATE<br><b>CA</b>                            |   | ZIP CODE<br><b>94404</b>   | No. of Pages<br><b>2</b>                            |

## 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE*   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED   |
|---------------|---|---|---|---|
| 6/17/2019     | <b>Eva Hess</b><br>[REDACTED] Foster City CA 94404  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | <b>\$1500.00</b><br><input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate |
| 8/26/2019     | <b>Mitch Drangle</b><br>[REDACTED] Foster City CA 94404   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Businessman<br>Self-employed<br>Aldran Chemical Inc.  | <b>\$1099.00</b><br><input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate |
| 6/19/2019     | <b>Dan Dyckman</b><br>[REDACTED] Foster City CA 94404   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Enginner<br>GeoForensics Inc  | <b>\$1000.00</b><br><input type="checkbox"/> Check if Loan<br>_____%<br>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

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|---|---|--------------------------|---|--|---|
| NAME OF FILER<br><b>Committee to Recall Council Member Herb Perez</b> |   |                          | Date of This Filing<br><b>10/30/2019</b>  | Date Stamp<br><b>CITY OF FOSTER CITY/ EMID</b> | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| AREA CODE/PHONE NUMBER<br>[REDACTED]                                  | I.D. NUMBER (if applicable)<br><b>1418889</b> |                          | Report No.<br><b>19 OCT 31 AM 9:14</b>  |  |   |
| STREET ADDRESS<br>[REDACTED]  |   |                          | <input type="checkbox"/> Amendment to Report No. (explain below)<br><b>RECEIVED</b> |  |   |
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|---------------|--|---|--|---|
| 9/6/2019      | <b>Solomon Tsai</b><br>[REDACTED] Foster City CA 94404   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self-employed<br>Gateway Hotel Group   | <b>\$1000.00</b><br><input type="checkbox"/> Check if Loan<br>_____%<br>Provide Interest rate |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br>_____%<br>Provide Interest rate                     |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br>_____%<br>Provide Interest rate                     |

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