

# 497 Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

|   |   |                          |   |   |   |
|---|---|--------------------------|---|---|---|
| <b>NAME OF FILER</b><br>Committee to Elect Patrick Sullivan for City Council 2020   |   |                          | <b>Date of This Filing</b> 10-22-2020   | Date Stamp<br><br><div style="font-size: 24px; font-weight: bold; margin: 10px 0;">RECEIVED</div> <div style="font-size: 18px; margin: 5px 0;">2020 OCT 22 P 3:25</div> <div style="font-size: 14px; margin: 5px 0;">CITY OF FOSTER CITY COMMUNICATIONS/ CITY CLERK</div> | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br><div style="background-color: black; width: 100px; height: 1.2em; margin-top: 5px;"></div> | <b>I.D. NUMBER (if applicable)</b><br>1423004 | <b>Report No.</b> 1      |   |   |   |
| <b>STREET ADDRESS</b><br><div style="background-color: black; width: 150px; height: 1.2em; margin-top: 5px;"></div>         |   |                          | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br><small>(explain below)</small> |   |   |
| <b>CITY</b><br>Foster City  | <b>STATE</b><br>Ca                            | <b>ZIP CODE</b><br>94404 | <b>No. of Pages</b> 1   |   |   |

## 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   |
|---------------|---|---|---|---|
| 9/29/2020     | California Real Estate<br>[REDACTED]<br>Los Angeles, Ca 90071                                   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 3000<br><input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate |
| 9/20/2020     | Gloria Marin<br>[REDACTED]<br>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 | Real Estate Remax   | 1500<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         |

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