

497 Contribution Report

Amounts may be rounded to whole dollars.

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CITY OF GARDEN GROVE
CITY CLERK'S OFFICE

NAME OF FILER
Thu-Ha Nguyen for Garden Grove City Council 2016

AREA CODE/PHONE NUMBER
714-745-5281

I.D. NUMBER (if applicable)
1389135

DATE OF THIS FILING
10/03/2016

REPORT NO.
TN-7

Amendment to Report No.
(explain below)

NO. OF PAGES
1

STREET ADDRESS
1440 N. Harbor Blvd., Suite 707

CITY
Fullerton

STATE
CA

ZIP CODE
92835

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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
10/02/2016	Garden Grove Police Association PAC FPPC ID:960891 11301 Acacia Parkway Garden Grove, CA 9240	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2000 <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: _____

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AREA CODE/PHONE NUMBER 714-745-5281	I.D. NUMBER (if applicable) 1389135	Date of This Filing 09/29/2016	Date Stamp SEP 29 PM 2:35
STREET ADDRESS 1440 N. Harbor Blvd., Suite 707 Fullerton		Report No. TN-6	
STATE ZIP CODE CA 92835		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
		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
09/28/2016	Richard Bui Jr. 1981 Annapolis Cir. Corona, CA 92881	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Contractor, Self-Employed	\$1500 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/28/2016	Duc Ngo 8543 Mac Alpine Rd. Garden Grove, CA 92841	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner, Greenbuild Construction & Design	\$1200 <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

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