

# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED  
CITY OF GARDEN GROVE  
CITY CLERK'S OFFICE

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Stephanie Klopfenstein City Council District 5 2016 AREA CODE/PHONE NUMBER (714) 510-0341 STREET ADDRESS 12511 Pine Street CITY Garden Grove		Date Stamp 2016 OCT 26 AM 10:41	CALIFORNIA 497 FORM For Official Use Only
I.D. NUMBER (if applicable) 1389674		Date of This Filing 10/25/2016	
STATE CA		Report No. 2016-6	
ZIP CODE 92840		<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 <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
10/25/2016	Southwest Regional Council of Carpenters PAC 533 S Fremont Ave, #501 Los Angeles, CA 90071 Committee ID # 870169	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		3,000.00  <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: \_\_\_\_\_