

497 Contribution Report

Amounts may be rounded to whole dollars.

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CITY OF GARDEN GROVE
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497 CONTRIBUTION REPORT

NAME OF FILER Kim Nguyen for City Council 2016		Date of This Filing 10/22/2016	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (714) 725-9972	I.D. NUMBER (if applicable) 1386732	Date Stamp 2016 OCT 24 AM 10:	
STREET ADDRESS 12152 Adrian St #8-202		Report No. 16-10	
CITY Garden Grove		<input type="checkbox"/> Amendment to Report No. (explain below)	
STATE CA	ZIP CODE 92840	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
10/22/2016	California Laborers for Equality & Progress 555 Capital Mall #1425 Sacramento, CA 95814 Committee ID # 781984	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		2,000.00 <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: _____