

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Committee to Re-Elect Ray Buenaventura for Daly City Council			Date of This Filing <u>10/10/2018</u>	Date Stamp CITY OF DALY CITY CITY CLERK	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER SF	I.D. NUMBER (if applicable) 1403724		Report No. <u>4</u>		
STREET ADDRESS _____			<input type="checkbox"/> Amendment to Report No. <u>2018 OCT 10 P 2:30</u> (explain below)		
CITY Daly City	STATE CA	ZIP CODE 94015	No. of Pages <u>RECEIVED</u>		

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
10/10/2018	Plumbers & Steamfitters Local # 467 Burlingame, CA 94010-2305	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ID # NL. 7782481	1000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/10/2018	Daly City Police Officers Association PAC Daly City, CA 94015	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FPPC # 862148	2500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/01/2018		<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: _____