

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <b>Gabriella Makstman for Daly City City Council 2018</b>		Date of This Filing <b>9/26/2018</b>	Date Stamp	<b>CALIFORNIA FORM 497</b> <small>For Official Use Only</small>
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) <b>Pending</b>	Report No. <b>2</b>	<b>CITY OF DALY CITY CITY CLERK</b>	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)	<b>2018 OCT -1 A 10: 29</b>	
CITY <b>Daly City CA</b>	STATE	ZIP CODE <b>94014</b>	No. of Pages <b>1</b>	

RECEIVED

## 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
9/28	California Real Estate Political Action Committee California Association of Realtors  Los Angeles, CA 90020	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000  <input type="checkbox"/> Check if Loan  _____% <small>Provide interest rate</small>
9/29	Chitsing KUO  Daly City 94015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	1,000  <input type="checkbox"/> Check if Loan  _____% <small>Provide interest rate</small>
		<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  _____% <small>Provide interest rate</small>

**\*\*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: \_\_\_\_\_