497 Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPO

CALIFORNIA FORM 497

For Official Use Only

Date Stamp: 2010 JUN 21 AM 7:37 CITY CLERK'S OFFICE

NAME OF FILER: RE-ELECT TOM BREWER TO CITY COUNCIL 2010

AREA CODE/PHONE NUMBER: 310-530-1365

I.D. NUMBER (if applicable): 1318486

STREET ADDRESS: 23020 CRENSHAW BL

CITY: TORRANCE, STATE: CA, ZIP CODE: 90505

Date of This Filing: 4/29/10

Report No.: 1

☐ 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
4/29/10	TED O PORTER [redacted] RANCHO PALOS VERDES, CA 90275	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	$100.00 ☐ Check if Loan Provide interest rat
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan Provide interest rat
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan Provide interest rat

*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: _____