

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> 08/20/2020	Date Stamp  <b>RECEIVED</b> City Clerk's Office  August 20, 2020	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1427211	<b>Report No.</b> 2020-1		
<b>STREET ADDRESS</b> 38 Executive Park, Suite 320		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92614	<b>No. of Pages</b> 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
08/20/2020	Allen Basso [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker Allen Basso	1,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/20/2020	Tustin Toyota 35 Auto Center Dr Tustin, CA 92782	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00  <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

Reason for Amendment: \_\_\_\_\_

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee (other than PTY or SCC)  
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# 497 Contribution Report

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497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> 08/25/2020	<b>Date Stamp</b>	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1427211	<b>Report No.</b> 2020-2	RECEIVED City Clerk's Office August 25, 2020	
<b>STREET ADDRESS</b> 38 Executive Park, Suite 320		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92614		

## 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
08/24/2020	Chambers Road LLC-Joseph Kazemi [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/24/2020	DRJW, LLC-Joseph Kazemi [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/24/2020	Mosher Street LLC-Joseph Kazemi [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate

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<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> 08/25/2020	<b>Date Stamp</b>	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1427211	<b>Report No.</b> 2020-2		
<b>STREET ADDRESS</b> 38 Executive Park, Suite 320		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92614	<b>No. of Pages</b> 2	

## 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
08/24/2020	Newport Beach Ferrari Maserati Colliasion Center, LLC 2975 Airway Ave Costa Mesa, CA 92626	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/24/2020	Sterling Collision Center, LLC-Joseph Kazemi 1111 Bell Ave Tustin, CA 92780	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00  <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

Reason for Amendment: \_\_\_\_\_

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<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> 09/04/2020	Date Stamp  <b>RECEIVED</b> City Clerk's Office  September 4, 2020	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1427211	<b>Report No.</b> 2020-3		
<b>STREET ADDRESS</b> 38 Executive Park, Suite 320		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92614	<b>No. of Pages</b> 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
09/04/2020	Allen Basso [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker Allen Basso	250.00  <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

Reason for Amendment: \_\_\_\_\_

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<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> 09/18/2020	<b>Date Stamp</b>  <b>RECEIVED</b> City Clerk's Office September 18, 2020	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1427211	<b>Report No.</b> 2020-4		
<b>STREET ADDRESS</b> 38 Executive Park, Suite 320		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92614	<b>No. of Pages</b> 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
09/17/2020	DCH Auto Group, Inc 2955 Pacific Coast Hwy Torrance, CA 90505	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/17/2020	OC Automobile Dealers Assn PAC 3737 Birch St, Ste 220 Newport Beach, CA 92660 Committee ID # 870777	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/17/2020	Jim Palmer [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO OCRM	1,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate

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Reason for Amendment: \_\_\_\_\_

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<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> 09/28/2020	Date Stamp  <b>RECEIVED</b> City Clerk's Office  September 28, 2020	<b>CALIFORNIA FORM 497</b>
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1427211	<b>Report No.</b> 2020-5		For Official Use Only
<b>STREET ADDRESS</b> 38 Executive Park, Suite 320		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ <small>(explain below)</small>		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92614		<b>No. of Pages</b> 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
09/28/2020	CA Apartment Assoc PAC 980 Ninth St Ste 1430 Sacramento, CA 95814 Committee ID # 745208	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00
		<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

Reason for Amendment: \_\_\_\_\_

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497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> <u>10/01/2020</u>	Date Stamp  <b>RECEIVED</b> City Clerk's Office October 1, 2020	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1427211	<b>Report No.</b> <u>2020-6</u>		
<b>STREET ADDRESS</b> 38 Executive Park, Suite 320		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
CITY Irvine	STATE CA	ZIP CODE 92614	<b>No. of Pages</b> <u>1</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
10/01/2020	Taxpayers for a Sustainable Economy 9070 Irvine Center Dr #150 Irvine, CA 92618 Committee ID # 1406014	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00  <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

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<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> <u>10/01/2020</u>	Date Stamp  <b>RECEIVED</b> City Clerk's Office October 1, 2020	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1427211	<b>Report No.</b> <u>2020-6</u>		
STREET ADDRESS 38 Executive Park, Suite 320		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
CITY Irvine	STATE CA	ZIP CODE 92614		
		<b>No. of Pages</b> <u>1</u>		

## 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
10/01/2020	Taxpayers for a Sustainable Economy 9070 Irvine Center Dr #150 Irvine, CA 92618 Committee ID # 1406014	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00  <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

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497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Gallagher for Tustin Council 2020			<b>Date of This Filing</b> <u>10/08/2020</u>	Date Stamp <b>RECEIVED</b> City Clerk's Office October 8, 2020	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1427211	<b>Report No.</b> <u>2020-8</u>			
<b>STREET ADDRESS</b> [REDACTED]			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92614	<b>No. of Pages</b> <u>1</u>		

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION <small>(IF APPLICABLE)</small>
10/07/2020	Republican Party of Orange County (ID# 742088) 1422 Edinger Ave., Ste. 110 Tustin, CA 92780	Republican Party of Orange County	1,500.00	11/03/2020
10/07/2020	Republican Party of Orange County (ID# 742088) 1422 Edinger Ave., Ste. 110 Tustin, CA 92780	Republican Party of Orange County	2,500.00	11/03/2020

Reason for Amendment: \_\_\_\_\_

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<b>NAME OF FILER</b> Gallagher for Tustin Council 2020			<b>Date of This Filing</b> <u>10/08/2020</u>	Date Stamp  <b>RECEIVED</b> City Clerk's Office October 8, 2020	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1427211		<b>Report No.</b> <u>2020-9</u>		
STREET ADDRESS			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
CITY	STATE	ZIP CODE	<b>No. of Pages</b> <u>1</u>		
Irvine	CA	92614			

## 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
10/08/2020	Lincoln Club of Orange County State PAC 9070 Irvine Center Dr #150 Irvine, CA 92618 Committee ID # 970861	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/08/2020	Taxpayers for a Sustainable Economy 9070 Irvine Center Dr #150 Irvine, CA 92618 Committee ID # 1406014	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00  <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

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<b>NAME OF FILER</b> Gallagher for Tustin Council 2020		<b>Date of This Filing</b> 10/12/2020	<b>Date Stamp</b>	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1427211	<b>Report No.</b> 2020-10	RECEIVED City Clerk's Office October 12, 2020	
<b>STREET ADDRESS</b> [REDACTED]		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ <small>(explain below)</small>	<b>No. of Pages</b> 1	
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92614		

## 1. Contribution(s) Received

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10/12/2020	Alexis Gevorgian 16633 Ventura Blvd Ste 1014 Encino, CA 91436	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President AMG & Associates, LLC	1,000.00  <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

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