

497 Contribution Report

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

NAME OF FILER Costa Mesa Taxpayers PAC (CMTAXPAC)		Date of This Filing 10/08/2014	RECEIVED CITY CLERK OCT -8 PM 4:53 COSTA MESA FAX	497 CONTRIBUTION REPORT CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (714) 540-2295	I.D. NUMBER (if applicable) 1352184	Report No. 14-4		
STREET ADDRESS 603 E Alton Ave STE H		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY Santa Ana	STATE CA	ZIP CODE 92705	No. of Pages 1	

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/08/2014	Home Rule for Costa Mesa (ID# 1347394) 603 E Alton Ave STE H Santa Ana, CA 92705	Charter Reform 11/4/14	3,000.00	

Reason for Amendment: _____