

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Dawn Murdock		Date of This Filing 8/26/20	
AREA CODE/PHONE NUMBER [REDACTED]		Report No. 1	
STREET ADDRESS 907 Via Coronel		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Palos Verdes Estates	STATE CA	ZIP CODE 90274	No. of Pages 1

Date-Stamp
AUG 27 2020

RECEIVED

CITY CLERK
PALOS VERDES ESTATES

CALIFORNIA FORM **497**

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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
8/26/20	Dawn Murdock 907 Via Coronel Palos Verdes Estates, CA 90274	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Management Consultant, Self-employed	\$1000.00 <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 _____%

* 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: _____