497 Contribution Report

Amounts may be rounded to whole dollars.

Reason for Amendment: .			9/14/2020	DATE RECEIVED	1. Contribution(s) Received	CITY Palos Verdes Estates	STREET ADDRESS 3005 Palos Verdes Dr W	AREA CODE/PHONE NUMBER	NAME OF FILER Jim Roos for Palos V
ntt			Carly Keefe Palos Verdes Estates, CA 90274	FULL NAME, STREET ADD (IF COMMITT)	Received	S	r W	IBER I.D. NUMBER (if applicable) 1429267	NAME OF FILER Jim Roos for Palos Verdes Estates City Council 2020
				FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR		STATE ZIP CODE CA 90274		₹ (if applicable)	
						(explain below) No. of Pages	Amendment to Report No	Report No	Date of 9/14 This Filing
	OTH COM SCC	OTH COM	OTH SCC	CONTRIBUTOR CODE*					9/14/2020
*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			Writer, Self	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		PALOS VERDES ESTATES	CITY CLERK	SEP 1 4 2023	Date Stamp
ee (other than PT ss entity)	☐ Che	☐ Che	\$1					For Official Use Only	CALIFORNIA
Y or SCC)	Check if Loan Check if Loan Check if Loan	Check if Loan % Provide interest rate	\$1000 Check if Loan Provide interest rate	AMOUNT RECEIVED				se Only	497