

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER  
 DAVID MCGOWAN FOR CITY COUNCIL 2022

AREA CODE/PHONE NUMBER  
 [REDACTED]

I.D. NUMBER (if applicable)  
 410 FILING NOT COMPLETED YET

STREET ADDRESS  
 2952 VIA ALVARADO

CITY  
 PALOS VERDES ESTATES

STATE  
 CA

ZIP CODE  
 90274

Date of This Filing  
 10/11/2022

Report No. 2

Amendment to Report No. (explain below)

No. of Pages 1

**CALIFORNIA FORM 497**  
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RECEIVED

OCT 11 2022

CITY CLERK  
 PALOS VERDES ESTATES

## 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
10/10/22	CRISTOPHER R. BOGGIANO [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VP Operations Solar Ranch Partners LLC	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
		<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: \_\_\_\_\_