

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Lisa Middleton for Palm Springs City Council 2017		Date of This Filing 9/25/2017	RECEIVED CITY OF PALM SPRINGS 2017 SEP 26 AM 10:07 OFFICE OF THE CITY CLERK
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1394265	Report No. Form 497 170923	CALIFORNIA FORM 497 For Official Use Only
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. (explain below)	
CITY Palm Springs	STATE CA	ZIP CODE 92264	No. of Pages 1

1. Contributions 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
08/11/2017	Harold Matzner [REDACTED] Palm Springs, CA 92262-7215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman Palm Springs International Film Festival	\$10,000.00 <input type="checkbox"/> Check if Loan _____ % Provide interest rate
09/22/2017	Harold Matzner [REDACTED] Palm Springs, CA 92262-7215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman Palm Springs International Film Festival	\$10,000.00 <input type="checkbox"/> Check if Loan _____ % Provide interest rate

Reason for Amendment: _____

*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