

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 10/26/2017	<p style="text-align: center;">RECEIVED CITY OF PALM SPRINGS Date Stamp 2017 OCT 26 PM 4:20 OFFICE OF THE CITY CLERK</p> <p style="text-align: right;"><i>Januel</i></p>	<p style="text-align: center;">CALIFORNIA FORM 497</p> <p style="text-align: center;">For Official Use Only</p>
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1394265	Report No. Form 497 171016777		
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
10/26/2017	Aftab Dada [REDACTED] Palm Springs, CA 92262-6605	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hotel Manager Hilton Palm Springs	\$1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/25/2017	Frederick Noble & Affiliated Entities 2045 E Tahquitz Canyon Way Palm Springs, CA 92262-7003	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$7,226.09 <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