

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Palm Springs Fire Safety Association PAC		Date of This Filing <u>10/7/19</u>	<b>RECEIVED</b> <small>Date Stamp</small> <b>CITY OF PALM SPRING</b> <b>2019 OCT -7 AM 8:55</b> <b>OFFICE OF THE CITY CLERK</b>	<b>CALIFORNIA FORM 497</b> <small>For Official Use Only</small>
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 881536	Report No. _____		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>		
CITY Yucaipa	STATE CA	ZIP CODE 92399		

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION <small>(IF APPLICABLE)</small>
9/6/19	Geoff Kors, Palm Springs, 92262	Geoff Kors for City Council 2019	1000.00	11/5/19
10/5/19	Les Young, Palm Springs, 92262	Les Young for City Council 2019 District 1	1000.00	11/5/19
10/5/19	Dennis Woods, Palm Springs, 92262	Dennis Woods for Palm Springs City Council District 2	1000.00	11/5/19

Reason for Amendment: \_\_\_\_\_