

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Lisa Middleton For Palm Springs City Council District 5, 2020		<b>Date of This Filing</b> 08/31/2020	RECEIVED CITY OF PALM SPRINGS 2020 AUG 31 PM 2:04 OFFICE OF THE CITY CLERK	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1394265	<b>Report No.</b> 154		
<b>STREET ADDRESS</b> [REDACTED]		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Palm Springs, CA 92264	<b>STATE</b>	<b>ZIP CODE</b>		<b>No. of Pages</b> 2

## 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
2020-08-27	Amalgamated Transit Union Local 1277 [REDACTED] Los Angeles, CA 90031 ID: 970941	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00  <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

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<b>CITY</b> Palm Springs, CA <b>STATE</b> CA <b>ZIP CODE</b> 92264		<b>No. of Pages</b> 2		

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

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

FORM	REFERENCE	NOTES
CA 497	Cover	Contribution received 08/27;Office Closed 08/28-08/30; filed 08/31