

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Orange County Employees Association PAC		Date of This Filing 10-28-2019	Date Stamp City of San Clemente OCT 28 2019 City Clerk Department	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 9494863631	I.D. NUMBER (if applicable) 801447	Report No. 2019-6		
STREET ADDRESS 1221 L Street, Suite 200		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Sacramento	STATE CA	ZIP CODE 95814	No. of Pages _____	

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10-28-2019	Jackson Hinkle For San Clemente City Council 2019, [REDACTED] [REDACTED] San Clemente CA, 92672, ID# 1419381	Jackson Hinkle, Candidate for San Clemente City Council	\$5000.00	November 5, 2019

Reason for Amendment: _____
