

# 497 Contribution Report

Amounts may be rounded to whole dollars.

|   |   |  |  |   |
|---|---|--|--|---|
| <b>NAME OF FILER</b><br>Mark Enmeier for San Clemente City Council 2022 |   | <b>Date of This Filing</b> 08/23/2022  | Date Stamp<br>City of San Clemente<br><br>AUG 23 2022<br><br>City Clerk Department | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br>[REDACTED]                             | <b>I.D. NUMBER (if applicable)</b><br>Pending | <b>Report No.</b> ENMEIER-01   |  |   |
| <b>STREET ADDRESS</b><br>[REDACTED]                                     |   | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |  |   |
| <b>CITY</b><br>[REDACTED]   | <b>STATE</b>                                  | <b>ZIP CODE</b><br>[REDACTED]  | <b>No. of Pages</b> _____  |   |

## 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br><small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br><small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED   |
|---------------|--|---|--|---|
| 08/19/2022    | Arlon Enmeier<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Certified Financial Planner,<br>Enmeier Planning   | 1000<br><br><input type="checkbox"/> Check if Loan<br><br>_____%<br>Provide interest rate |
| 08/22/2022    | Democratic Women of South Orange County<br>FPPC ID: 1390408<br>604 Via Promontorio<br>San Clemente, CA 92672   | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | 1000<br><br><input type="checkbox"/> Check if Loan<br><br>_____%<br>Provide interest rate |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br><br>_____%<br>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>AREA CODE/PHONE NUMBER</b><br>[REDACTED]                             | <b>I.D. NUMBER (if applicable)</b><br>Pending | <b>Report No.</b> <u>ENMEIER-01</u>  |  |
| <b>STREET ADDRESS</b><br>[REDACTED]                                     |   | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |  |
| <b>CITY</b> [REDACTED]  | <b>STATE</b> [REDACTED]                       | <b>ZIP CODE</b> [REDACTED]   | <b>No. of Pages</b> _____  |

## 2. Contribution(s) Made

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

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