

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <i>Knoblock For City Council 2022</i> I.D. NUMBER (if applicable) <i>1430039</i>	Date of This Filing <i>10/21/22</i> Report No. <i>5</i>	Date Stamp <b>City of San Clemente</b>  OCT 21 2022 <b>City Clerk Department</b>	CALIFORNIA FORM <b>497</b> For Official Use Only
STREET ADDRESS [REDACTED]	<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <i>San Clemente CA</i>	No. of Pages <i>1</i>		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COM/ITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
<i>10/21/22</i>	<i>Fieldstead and Company</i> <i>Howard F. Ahmanson</i> [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>Self employed investor</i>	<i>2,000.</i> <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<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