

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Beach Stewards for San Clemente, Yes on BB			<b>Date of This Filing</b> <u>09/24/2024</u>	Date Stamp	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1464202		<b>Report No.</b> <u>2024-15</u>		
<b>STREET ADDRESS</b> 9070 Irvine Center Drive #150			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92618	<b>No. of Pages</b> <u>1</u>		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, 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
09/23/2024	Orange County Professional Firefighters Assn 1121 L Street Ste 200 Sacramento, CA 95814 Committee ID # 1473467	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		11,000.00  <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

**\*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

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