

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Carlos Escobedo for Santa Maria City Council District 1 2020			Date of This Filing 09/16/2020	Date Stamp	CALIFORNIA FORM 497 For Official Use Only 17 SEP 2020 AM 8:27 CITY CLERK'S OFFICE
AREA CODE/PHONE NUMBER 805-619-0566	I.D. NUMBER (if applicable) 1424210		Report No. 5		
STREET ADDRESS 124 W. Main Street, Suite D			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Santa Maria	STATE CA	ZIP CODE 93458		No. of Pages 1	

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
09/16/2020	UA Journeymen & Apprentices, Local #250 18355 S. Figuero St. Gardena, CA 90248 ID: 743959	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/16/2020	Southern California Pipe Trades, District Council #16 501 Shatto Place, Suite 400 Los Angeles, CA 90020 ID: 760715	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		1,000.00 <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

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