

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Santa Maria Police Officers' Association PAC			<b>Date of This Filing</b> <u>10/17/2018</u>	<b>Date Stamp</b>	<b>CALIFORNIA FORM 497</b> For Official Use Only  <b>17 OCT 2018 PM 2:40</b> <b>CITY CLERK'S OFFICE</b>
AREA CODE/PHONE NUMBER (805) 922-4881	I.D. NUMBER (if applicable) 1292068	<b>Report No.</b> <u>SMPOAPOC-2</u>			
<b>STREET ADDRESS</b> 2151 S. College Dr., Suite 101			<input checked="" type="checkbox"/> <b>Amendment to Report No.</b> <u>SMPOAPOC-2</u> <small>(explain below)</small>		
CITY Santa Maria	STATE CA	ZIP CODE 93455	<b>No. of Pages</b> <u>1</u>		

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION <small>(IF APPLICABLE)</small>
10/11/2018	Yes on U 2018 (ID# 1408299) P.O. Box 6509 Santa Maria, CA 93456	Yes on U 2018-Protect Santa Maria	5,000.00	

Reason for Amendment: Added Committee ID Number 1408299