## **497 Contribution Report**

## Amounts may be rounded to whole dollars.

							497 00	NTRIBUTION REPORT
NAME OF FILER				Date of	-	Date Stamp	CALIFO	RNIA 107
Scott Peotter for City Council 2018			This Filing	10/31/2018		For Official Use Only		
AREA CODE/PHONE NUMBER (949)250-7118		I.D. NUMBER (if applicable) 1364694		Report No. 18-14				E-Filed 10/31/2018 22:15:31
STREET ADDRESS			☐ Amendment to Report No		Filing ID: 174636366			
CITY		STATE ZIP CODE		(explain below)	_			
Newport Beach		CA	92660	No. of Pages	1			
1. Contributio	on(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIE			RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
10/31/2018	Mark Moshayedi Newport Coast, CA 92657				∑ IND ☐ COM	CEO MSM Global Ventures		1,100.00
					☐ OTH ☐ PTY			☐ Check if Loan
					SCC			Provide interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY			☐ Check if Loan
					SCC			% Provide interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan
					1			Provide interest rate
Reason for Amend	lment:					*Contributor Codes IND – Individual COM – Recipient Cor OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	usiness entit	y)

FPPC Form 497 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov