497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER			Date of	Date Stamp	CALIFORNIA 497	
Duffy Duffield for City Council 2018			This Filing		FORM	
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable	e)	D (N 19-21	E-Filed	For Official Use Only	
(949)645-6811	1367215		Report No. <u>18-31</u>	10/31/2018 22:04:40		
STREET ADDRESS			Amendment to Report No	Filing ID: 174636255		
CITY	STATE	ZIP CODE	(explain below)			
Newport Beach	CA	92663	No. of Pages1			

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/30/2018	Bruce Degler Newport Beach, CA 92661	IND □ COM □ OTH □ PTY □ SCC	CEO Dispatch Trucking	1,100.00
		□ IND □ COM □ OTH □ PTY □ SCC		☐ Check if Loan % Provide interest rate
		□ IND □ COM □ OTH □ PTY □ SCC		Check if Loan

*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: ____