

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Raymond Gregory for City Council 2018			Date of This Filing 09/17/2018	Date Stamp <div style="border: 2px solid blue; padding: 5px; display: inline-block;"> RECEIVED SEP 17 2018 CITY CLERK DEPT </div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (760) 861-9498	I.D. NUMBER (if applicable) 1400187	Report No. 1			
STREET ADDRESS 68130 Marina Rd		<input type="checkbox"/> Amendment to Report No. _____ (explain below)			
CITY Cathedral City	STATE CA	ZIP CODE 92234	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
09/17/2018	Desert Stonewall Democrats Committee # 1220539 P.O. Box 4536 Palm Springs, CA 92263	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000 <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

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