### 497 Contribution Report

**Name of Filer:** O'Neill for City Council 2016  
**Area Code/Phone Number:** (949) 416-0313  
**I.D. Number (If Applicable):** 1380980  
**Street Address:** 2618 San Miguel Dr #173  
**City:** Newport Beach  
**State:** CA  
**Zip Code:** 92660

**Date of This Filing:** 09/21/2016  
**Date Stamp:** 2016 SEP 21 AM 11:35  
**OFFICE OF THE CITY CLERK**  
**CITY OF NEWPORT BEACH**  
**CALIFORNIA FORM 497**  
**For Official Use Only**

#### 1. Contribution(s) Received

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor</th>
<th>Contributor Code</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/21/2016</td>
<td>Susan Riddle</td>
<td>☑ IND</td>
<td>Retired</td>
<td>1,100.00</td>
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Reason for Amendment: ____________________________________________

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**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

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**FPPC Form 497 (Jan/2016)**  
**FPPC Advice:** advice@fppc.ca.gov (888/275-3772)  
**www.fppc.ca.gov**