**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>10/27/2016</td>
<td>Eastside LLC</td>
<td></td>
<td></td>
<td>1,100.00</td>
</tr>
<tr>
<td>10/27/2016</td>
<td>Michael Gelfand</td>
<td>X</td>
<td>Real Estate Terra Vista Management</td>
<td>1,100.00</td>
</tr>
<tr>
<td>10/27/2016</td>
<td>Lori Nguyen Insurance Agency</td>
<td></td>
<td></td>
<td>1,100.00</td>
</tr>
</tbody>
</table>

*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: 

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**RECEIVED**

**497 Contribution Report**

Amounts may be rounded to whole dollars.

**NAME OF FILER**

O'Neill for City Council 2016

**AREA CODE/PHONE NUMBER**

(949) 416-9313

**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** 10/27/2016

**Report No.** 16-9

□ Amendment to Report No. (explain below)

**No. of Pages** 1

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FPPC Form 497 (Jan/2016)
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