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 431	
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable	e)	Report No. <u>18-4</u>	E-Filed 08/30/2018 13:55:30	For Official Use Only	
(949)645-6811	1367215					
STREET ADDRESS			Amendment to Report No.	Filing ID: 173410749		
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
08/30/2018	Jack Cancellieri Newport Beach, CA 92662	IND COM OTH PTY	Produce Legacy Farms	1,100.00
				% Provide interest rate
08/30/2018	Kent Wilken Newport Beach, CA 92660	 IND COM OTH PTY SCC 	Retired	1,000.00
		□ 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: ____