497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER		Date of This Filing	Date Stamp	CALIFORNIA FORM 497
Friends of Dominic Foppoli for Mayor 2020		09/22/2020		
AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*	Report No. 2020-05	RECEIVED	For Official Use Only
[redacted]	1425416		SEP 22 2020	
STREET ADDRESS		☐ Amendment to Report No. (explain below)	TOWN OF WINDSOR	
[redacted]				
CITY	STATE / ZIP CODE	No. of Pages 1 of 1		
Windsor	CA 95492			

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
09/22/20	Jennifer Coombs [redacted] Windsor, CA 95492	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker	1,000 ☐ Check if Loan _____% Provide interest rate
09/22/20	Richard Coombs [redacted] Windsor, CA 95492	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investor / Self-Employed Coombs Development	1,000 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate

* 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: _____