

497 Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.



497 CONTRIBUTION REPORT

NAME OF FILER Lori Ogorchock Antioch City Council 2018		CALIFORNIA FORM 497 For Official Use Only	
AREA CODE/PHONE NUMBER 1408237		RECEIVED AUG 30 2018 CITY OF ANTIOCH CITY CLERK	
I.D. NUMBER (if applicable) 1408237		Date Stamp	
STATE ZIP CODE		ORIGINAL	
NAME OF FILER LORI OGORCHOCK Antioch City Council 2018 FPPC ID # 1408237 4038 Boulder Drive Antioch, CA 94509-6233		Date of This Filing <u>08-30-2018</u> Report No. <u>2018-01</u> <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages <u>1</u>	

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
8/29/2018	Plumbing Industry Consumer Protection Fund United Association Local No. 159 1308 Roman Way Martinez, California 94553	<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

**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: Contribution of \$1,000.