

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Elect Patrick "Cork" Irwin for City Council 2018		Date of This Filing 09/27/2018	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (909) 936-0611	I.D. NUMBER (if applicable) 1412030	Report No. 1	RECEIVED SEP 27 2018 City of Banning City Clerk's Office	
STREET ADDRESS 123 SUMMITT DRIVE		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>		
CITY BANNING	STATE CA	ZIP CODE 92220	No. of Pages 1	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
09/26/2018	BUSINESS LEADERS FOR ETHICAL GOVERNMENT 330 ENCINITA BLVD., SUITE 101 ENCINITAS, CA 92024 FPPC ID# 1407824	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00 <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: _____