497 Contribution Report

NAME OF FILER
Ed Smith

AREA CODE/PHONE NUMBER

I.D. NUMBER (Applicable)
1346143

STREET ADDRESS

CITY
Monterey

STATE
Ca

ZIP CODE
93940

Date of This Filing
10-11-14

Report No.
4

Amendment to Report No.

No. of Pages
2

CALIFORNIA FORM 497

FOR OFFICIAL USE ONLY

Received
OCT 13 2014
City Clerk’s Office

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>
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<tbody>
<tr>
<td>10-10-14</td>
<td>Lincoln Club of Northern California PAC</td>
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<td>FPPC#820082</td>
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<td>455 Capitol Mall, Suite 600</td>
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<td>Sacramento, Ca. 95814</td>
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Reason for Amendment:

*Contributor Codes
IND – Individual
COM – Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee
2. Contribution(s) Made

<table>
<thead>
<tr>
<th>DATE MADE</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT</th>
<th>CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION</th>
<th>AMOUNT OF CONTRIBUTION</th>
<th>DATE OF ELECTION</th>
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Reason for Amendment: ________________________________

FPPC Form 497 (November/07)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)