

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Mike Morasco for City Council 2020			Date of This Filing <u>08/17/2020</u>	Date Stamp <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;"> E-Filed 08/17/2020 13:56:03 Filing ID: 191966772 </div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (760)294-9585	I.D. NUMBER (if applicable) 1380198	Report No. <u>2020-2</u> <input type="checkbox"/> Amendment to Report No. _____ (explain below)			
STREET ADDRESS _____			No. of Pages <u>1</u>		
CITY Escondido	STATE CA	ZIP CODE 92025			

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION <small>(IF APPLICABLE)</small>
08/17/2020	Republican Party of San Diego County (ID# 741949) San Diego, CA 92119		1,000.00	

Reason for Amendment: _____