

To Angela Louis Fax 650 201-2710

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER Committee to Elect Ann Schneider to Millbrae City Council 2015		Date of This Filing 9/14/2015	RECEIVED CITY OF MILLBRAE SEP 14 2015	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 650-697-6249	I.D. NUMBER (if applicable) FPPC # 1359246	Report No. 1		
STREET ADDRESS 406 Palm Ave		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Millbrae	STATE CA	ZIP CODE 94030	No. of Pages 1	

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
9/13/2015	AGH Management Corp.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00 <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: Not an amendment. First donation received that is over \$1000 in aggregate, since August 5, 2015.

09/14/2015 2:12PM Job Number 51171 0001