

497 Contribution Report

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

NAME OF FILER COMMITTEE TO ELECT TOM DAVIS - CITY COUNCIL 2010		Date of This Filing 10-26-10	Date Stamp	RECEIVED OCT 26 2010 CITY CLERK'S OFFICE CITY OF SOUTH LAKE TAHOE	497
AREA CODE/PHONE NUMBER (530) 541-0106	I.D. NUMBER (if applicable) 1332237	Report No. T.D. 1		CALIFORNIA FORM 497 <small>For Official Use Only</small>	
STREET ADDRESS 1481 WALKUP		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>			
CITY SOUTH LAKE TAHOE	STATE CA	ZIP CODE 96150	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
10-26-10	PARK PAC 1300 BUCKEYE RD STE A MINDEN NV 89423	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" 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

Reason for Amendment: _____

*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