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09:24:36 p.m. 02-26-2020  
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# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED

497 CONTRIBUTION REPORT

**NAME OF FILER**  
West Covina Police Officers Association PAC Sponsored by West Covina Police Officers Association

**AREA CODE/PHONE NUMBER** (626) 939-8568      **I.D. NUMBER (if applicable)** 1280884

**STREET ADDRESS**  
1444 West Garvey Avenue

**CITY** West Covina      **STATE** CA      **ZIP CODE** 91790

**Date of This Filing** 02/26/2020

**Report No.** 22620

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 1

**Date Stamp**  
2020 MAR -2 AM 8:09

CITY OF WEST COVINA  
CITY CLERK'S OFFICE

**CALIFORNIA FORM 497**

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## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
02/26/2020	PUBLIC SAFETY COMMITTEE FOR YES ON MEASURE WC, SPONSORED BY WEST COVINA FIREFIGHTERS ASSOCIATION LOCAL 3226 (ID# 1424529) 777 S Figueroa St #4050 Los Angeles, CA 90017	Proposed Transactions (Sales) and Use Tax Measure: WC City of West Covina	20,000.00	03/03/2020

Reason for Amendment: \_\_\_\_\_