### 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED |
|---------------|-------------------------------------------------------|------------------|----------------------------------------------------------------------------------------|-----------------
| 08/15/14      | Dana Claire Smith, Daly City, CA 94014                | ☑ IND            | Landlord (I rent a room in my house)                                                   | $2,000          |
|               |                                                       |                  |                                                                                       |                  |
| 08/15/16      | Judith A. Christensen, Daly City, CA 94014            | ☑ IND            | City Councilmember, City of Daly City                                                  | $4,000          |

**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
1. Contribution(s) Received

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</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>
</tr>
</thead>
<tbody>
<tr>
<td>08/16/16</td>
<td>Renato Satorre, Daly City, CA 94015</td>
<td>□ IND</td>
<td>Owner, Health Professionals Inc.</td>
<td>$1,000</td>
</tr>
</tbody>
</table>

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- SCC — Small Contributor Committee
# 497 Contribution Report

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</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>
</tr>
</thead>
<tbody>
<tr>
<td>09/19/16</td>
<td>Dana Clare Smith For Daly City Council 2016 Daily City CA 94014</td>
<td>☑ IND</td>
<td>Owner, Landlord Rents Rooms in my house</td>
<td>$500</td>
</tr>
<tr>
<td>09/20/16</td>
<td>Dana Clare Smith For Daly City Council 2016 Daily City CA 94014</td>
<td>☑ IND</td>
<td>Owner, Landlord Rents Rooms in my house</td>
<td>$700</td>
</tr>
</tbody>
</table>

**Contributor Codes**
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- PTY = Political Party
- SCC = Small Contributor Committee

Reason for Amendment: ____________________________________________________________________

FPPC Form 497 (March/2011)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### 497 Contribution Report

**Name of Filer:** Dana Claire Smith for Daly City Council

**Report Number:** 4

**Date of This Filing:** 10/08/16

**Date Stamp:** Emailed 10/8/2016

**City of Daly City:**

**State:** CA

**Zip Code:** 94014

---

### 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</th>
<th>Amount Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/07/16</td>
<td>Charles Chen</td>
<td>IND</td>
<td>Owner H C Design</td>
<td>$1,000</td>
</tr>
<tr>
<td></td>
<td>South San Francisco, CA 94080</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Contributor Codes**

- **IND** - Individual
- **COM** - Committee (other than PTY or SCC)
- **OTH** - Other (e.g., business entity)
- **PTY** - Political Party
- **SCC** - Small Contributor Committee

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Reason for Amendment:
## 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>
</tr>
</thead>
<tbody>
<tr>
<td>11/08/16</td>
<td>Point Martin&lt;br&gt;4369 Lilac Ridge Road&lt;br&gt;San Ramon, CA 94582</td>
<td>OTH</td>
<td></td>
<td>$1,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>□ Check if Loan&lt;br&gt;Provide interest rate</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>□ Check if Loan&lt;br&gt;Provide interest rate</td>
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Reason for Amendment: __________________________________________

[Signature]

City of Daly City
CITY CLERk

CALIFORNIA FORM 497

497 CONTRIBUTION REPORT

2016 Nov 10 P 1:43

RECEIVED