

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER Daly City Police Officers Association PAC		Date of This Filing 10/3/24	RECEIVED: Date Stamp OCT 03 2024 PM02:01 CITY OF DALY CITY CITY CLERK	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 862148	Report No. 24-2		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Daly City	STATE CA	ZIP CODE 94015		

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)
10/2/24	Glenn Sylvester [REDACTED] Daly City, Ca. 94014	Sylvester for Daly City Council 2024	\$2000	11/5/24
10/3/24	Juslyn Manalo [REDACTED] Daly City, Ca. 94014	Juslyn Manalo for Daly City Council 2024	\$2000	11/5/24

Reason for Amendment: _____