

# 497 Contribution Report

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

CITY CLERK  
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497 CONTRIBUTION REPORT

NAME OF FILER <i>Glenn Fitzgerald Jacobs</i>		Date of This Filing <i>8/21/14</i>	Date Stamp <b>AUG 21 PM 4:33</b>	<b>CALIFORNIA FORM 497</b> <small>For Official Use Only</small>
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) <i>Padding</i>	Report No. <u>1</u>		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>		
CITY <i>Moreno Valley</i>	STATE <i>CA</i>	ZIP CODE <i>92557</i>	No. of Pages <u>1</u>	

## 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
<i>8/21/14</i>	<i>Glenn Fitzgerald Jacobs</i> [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>ASSISTANT PRINCIPAL Moreno Valley U.S.D.</i>	<i>\$3500</i> <input checked="" type="checkbox"/> Check if Loan <i>N/A</i> % <small>Provide interest rate</small>
		<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 _____ % <small>Provide interest rate</small>
		<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 _____ % <small>Provide interest rate</small>

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