

497 Contribution Report

Amounts may be rounded to whole dollars.

| | | | | |
|---|--|--|---------------------|---|
| NAME OF FILER Art Kiesel for City Council 2022 | | Date of This Filing 9/7/22 | Date Stamp | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1452685 | Report No. 1 | RECEIVED | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. (explain below) | 2022 SEP -8 P 10:02 | |
| CITY Foster City | STATE CA | ZIP CODE 94404 | No. of Pages 1 | CITY OF FOSTER CITY COMMUNICATIONS/ CITY CLERK |

1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE* | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED |
|---------------|--|---|--|--|
| 9/7/2022 | Art Kiesel [REDACTED] Foster City, CA 9444 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired | 8,000.00 <input checked="" type="checkbox"/> Check if Loan 0 % <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