497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER	Date of This Filing	5/26/206	Date Stamp	
Schott for Hayward City Council 2016				

AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*	Report No. ___7___	For Official Use Only
510-816-3433	10383200		

STREET ADDRESS

☐ Amendment to Report No. _____ (explain below)

CITY	STATE	ZIP CODE	No. of Pages ___1___
Hayward	CA	94544	

05/26/16 16:50 CLK

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
5/25/2016	Felson Companies, Inc. 1290 B. St Ste 212 Hayward, CA 94541	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$ 1,000 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate

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