

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Hensel Phelps Construction		Date of This Filing 09/12/2018	Date Stamp City of San Jose Office of the City Clerk SEP 12 2018 <input checked="" type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED <i>encl</i>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (949) 852-0111	I.D. NUMBER (if applicable) 498738	Report No. 2018-1		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Irvine	STATE CA	ZIP CODE 92612		

## 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)
09/06/2018	Safer San Jose - Yes on Measure T [REDACTED] San Jose, CA 95126	Disaster Preparedness, Public Safety, and Infrastructure Bond T City of San Jose	20,000.00	11/06/2018

Reason for Amendment: \_\_\_\_\_