

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Noah Griffin for Tiburon Town Council 2021 <b>AREA CODE/PHONE NUMBER</b> (415) 884-5500 <b>STREET ADDRESS</b> [REDACTED] <b>CITY</b> Novato	<b>Date of This Filing</b> 08/31/2021 <b>Report No.</b> 210831-1 <input type="checkbox"/> Amendment to Report No. (explain below) <b>No. of Pages</b> 1	Date Stamp <b>RECEIVED</b> AUG 31 2021 TOWN MANAGERS OFFICE TOWN OF TIBURON	<b>CALIFORNIA FORM 497</b> For Official Use Only
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## 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
08/31/2021	John Briscoe [REDACTED] Novato, CA 94949	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Briscoe Investor and Bazel LLP	1,000.00  <input type="checkbox"/> Check if Loan Provide interest rate _____%
		<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 Provide interest rate _____%
		<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 Provide interest rate _____%

\*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

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