

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Thomas Aujero Small for Culver City Council 2026		Date of This Filing 09/02/2026	Date Stamp E-Filed 09/02/2026 11:06:44 Filing ID: 217346650	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (310) 922-7286	I.D. NUMBER (if applicable) 1492506	Report No. 5		
STREET ADDRESS		☐ Amendment to Report No. _____ (explain below)		
CITY Covina	STATE CA	ZIP CODE 91722		

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
09/01/2026	Nancy Geshke Santa Monica, CA 90405	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher LAUSD	1,160.00 ☐ 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