

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Spencer Short for Lincoln City Council 2026		Date of This Filing 09/23/2026	Date Stamp City Clerk SEP 23 2026 City of Lincoln	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 916-295-8203	I.D. NUMBER (if applicable) 1496468	Report No. 1		
STREET ADDRESS 5701 Lonetree Blvd Suite 202-d		☐ Amendment to Report No. _____ (explain below)		
CITY Rocklin	STATE CA	ZIP CODE 95765		

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
09/23/2026	Stan Nader [REDACTED]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	1,000.00 ☐ Check if Loan _____% Provide interest rate
09/23/2026	Lynda Timbers [REDACTED]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Executive Director of Non-Profit Project Go, Inc.	1,000.00 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ 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: _____