497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER		Date of	09/13/2022		CALIFORNIA 497		
AREA CODE/PHONE NUMBER	EA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1442881		This FilingReport No. 3	03/13/2022		FORM FORM For Official Use Only	
STREET ADDRESS CITY	ET ADDRESS STATE ZIP CODE		Amendmento Report No (explain below) No. of Pages		DECEIVED SEP 1 3 2022 BY:		
1. Contribution(s)	Received	CA 90716					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBI			CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS		
	Gardens Casino aiian Gardens, C	A 90716		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		4,900.00 Check if Loan ** Provide interest rate	
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan ———————————————————————————————————	
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan	
Reason for Amendment:					*Contributor Codes IND – Individual COM – Recipient Committee OTH – Other (e.g., business PTY – Political Party SCC – Small Contributor Com	entity)	