

497 Contribution Report

Amounts may be rounded to whole dollars.

0218

RECEIVED BY 497 CONTRIBUTION REPORT

NAME OF FILER
Committee to Elect Gerard McCallum for Water Replenishment District
Division 1 2022

AREA CODE/PHONE NUMBER (213) 489-4792

I.D. NUMBER (if applicable) 1453333

STREET ADDRESS

CITY Norwalk **STATE** CA **ZIP CODE** 90650

Date of This Filing 10/13/2022

Report No. 3

Amendment to Report No. _____
(explain below)

No. of Pages 1

LOS ANGELES CO Date Stamp
email: 10/13
2022 OCT 14 AM 9:07
CALIFORNIA FORM 497
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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
10/07/2022	Miguel Luna Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer Urban Semillas	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/07/2022	Miguel Luna Los Angeles, CA 90026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer Urban Semillas	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

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