

**497 Contribution Report** *Peop PCC*

Amounts may be rounded to whole dollars.

0218-4-L001  
497 CONTRIBUTION REPORT

**NAME OF FILER**  
Yes on PCC; Committee major funding from Pasadena City College Foundation

**AREA CODE/PHONE NUMBER**  
(916) 285-5733

**I.D. NUMBER (if applicable)**

**STREET ADDRESS**

**CITY** Sacramento **STATE** CA **ZIP CODE** 95815

**Date of This Filing** 09/06/2022

**Report No.** 286537-AB

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 1

RECEIVED BY  
LOS ANGELES COUNTY  
Date Stamp  
email 9/6/22  
2022 SEP -8 PM 12:25  
CAMPAIGN FINANCE

**CALIFORNIA FORM 497**  
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G11366

**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
08/31/2022	Pasadena City College Foundation Pasadena, CA 91106	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		150,000.00  <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: \_\_\_\_\_

S