497 Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

CITY CLERK
MORENO VALLEY
RECEIVED
14 SEP 19 AM 7:56
Date Stamp

497 CONTRIBUTION REPORT

CALIFORNIA FORM 497

For Official Use Only

NAME OF FILER
Gwendolyn Cross for City Council 2014

AREA CODE/PHONE NUMBER
[redacted]

I.D. NUMBER (if applicable)
1360513

STREET ADDRESS
[redacted]

CITY: Los Angeles
STATE: CA
ZIP CODE: 90008

Date of This Filing: 9/18/14

Report No. 1

☐ Amendment to Report No. _____ (explain below)

No. of Pages 1

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
9/18/14	Vision for Compton: Elect Aja Brown for Mayor of Compton 2013 525 E. Seaside Way, #101-C Long Beach, CA 90802 #1355540	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		1,000.00 ☐ 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

*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: _____

9514133009
4242509440 >>
TINAFAX4242509440
2014-09-19 10:58