

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER

Comm To Elect Steve Hofbauer AVAD 2022

AREA CODE/PHONE NUMBER

661-

I.D. NUMBER (if applicable)

STREET ADDRESS

CITY

PALMDALE

STATE

CA

ZIP CODE

93551

Date of This Filing

10/20/22

Report No.

22-02

Amendment to Report No. (explain below)

No. of Pages

2

Date Stamp

RECEIVED BY LOS ANGELES COUNTY

2022 OCT 21 AM 9:01

CAMPAIGN FINANCE DISCLOSURE SECTION

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
10/19/22	CAMACHO AUTO SALES PALMDALE, CA 93551	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	AUTO DEALER	1000 - <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/19/22	ROBERTSON PALMDALE HONDA PALMDALE, CA 93551	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	AUTO DEALER	1000 - <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/20/22	AV CHEVROLET LANCASTER, CA 93534	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	AUTO DEALER	1500 - <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

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <b>Comm To Elect STEVE HOEBAUER AVAD 2022</b>		Date of This Filing <b>10/20/22</b>	Date Stamp <b>RECEIVED BY LOS ANGELES COUNTY 2022 OCT 21 AM 9:01</b>	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable)	Report No. <b>22-02</b>		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	<b>CAMPAIGN FINANCE DISCLOSURE SECTION</b>	
CITY <b>PALMDALE</b>	STATE <b>CA</b>	ZIP CODE <b>93551</b>		

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10/20/22	STEVEN D. HOEBAUER  PALMDALE, CA 93551	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	1500-  <input checked="" 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
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