497 Contribution Report		Amounts ma	ay be rounded to	whole dollars.			
AME OF FILER COMM TO E REA CODE/PHONE NUMB B61-450- STREET ADDRESS CITY PALMON	8099	I.D. NUMBER (if applicable) 1455070 STATE ZIP CODE CA-93551	Report No. 2	12-05-1 11 22-05 0	Date Stamp RECEIVED BY IS ANGELES COUNTY IS ANOV -7 PM 2: 35 AMPAIGN FINANCE SCLOSURE SECTION	CALIFO FOR	
1. Contribution(s) Received						
DATE RECEIVED	FULL	NAME, STREET ADDRESS AND ZIP CODE OF CONTRIB (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	UTOR	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMI (IF SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED
11/02/22	PACIFI	C. SUMMITTILBURY BRACA 9/801		IND COM OTH PTY SCC			2000 Check if Loan Provide interest rate
				IND COM OTH PTY SCC			Check if Loan
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan
Reason for Amendme	nt: Corre	TEO/COMPLETED OMISSI	ON S		* Contributor Codes IND - Individual COM - Recipient Comm OTH - Other (e.g., busi PTY - Political Party SCC - Small Contributo	ness entity	<i>(</i>)
)		<u> </u>	FPPC Advice: ac		PC Form 497 (Feb/20 c.ca.gov (866/275-37