497 Contribu	ution Report		Amounts ma	y be rounded to w			CEIVED			NTRIBUTION REPORT
NAME OF FILER Yes on K for D	Date of This Filing	09/30/2022		Date Stamp		FOR				
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)			Dame t No. 22	ZDZZ SEI	P 30 A1	9:57	For	Official Use Only		
(714) 540-2295 1453455 STREET ADDRESS			Report No. 22	¢AMP/	AIGN FI	NANCE				
c/o Lysa Ray					Amendment to Report No.					1
CITY		STATE	ZIP CODE	(explain below)		1				
Santa Ana		CA	92704	No. of Pages	1					
1. Contribution(s) Received										
DATE RECEIVED	FULL NAME	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTION (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
09/29/2022	Pro-Craft Construct Redlands, CA 92373	ion			☐ IND☐ COM☐ OTH☐ PTY☐ SCC					250.00 Check if Loan ** Provide interest rate
09/29/2022	Blach Construction San Jose, CA 95131				☐ IND☐ COM☐ OTH☐ PTY☐ SCC					2,500.00 Check if Loan ** Provide interest rate
09/29/2022	Pro-Craft Construct Redlands, CA 92373	ion			☐ IND☐ COM☐ OTH☐ PTY☐ SCC					2,000.00 Check if Loan ** Provide interest rate
Reason for Amen	dment:						OTH - Oth PTY - Poli	idual cipient Con ner (e.g., b tical Party	nmittee (oth usiness ent tor Committ	i