497 Contribution Report

Amounts may be rounded to whole dollars.

						497 CONTRIBUTION REPORT	
NAME OF FILER Maureen Craft for Elk Grove City Council 2020			Date of This Filing	10/06/2020		CALIFORNIA 497 FORM For Official Use Only	
AREA CODE/PHONE NUMBER I.D. NUMBER (il applicable)				*			
(916) 796-2900 1418422		Report No. 68	34928-KE				
9630 Bruceville Road, Suite 106-282			Amendme to Report No				
CITY	Y STATE ZIP CODE		(explain below)		CITY CLERK'S OFF OCT 06 2020 PM04		
Elk Grove		CA 95757	No. of Pages	1	E E	ner no sasa bandiin	
1. Contributi	on(s) Received						
DATE RECEIVED	FULL NAM	ME, STREET ADDRESS AND ZIP CODE OF CO	DNTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOY! (IF SELF-EMPLOYED, ENTER NAME OF BUSINE		
10/05/2020	Sacramento Central Labor Council - COPE 5429 Madison Avenue Sacramento, CA 95841 Committee ID # 743338			☐ IND IX COM ☐ OTH ☐ PTY ☐ SCC		1,500.00 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	
Reason for Amendment:					*Contributor Codes IND – Individual COM – Recipient Committe OTH – Other (e.g., busine: PTY – Political Party SCC – Small Contributor Co	ss entity)	