497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBITION REPORT

						731 0	ONTRIBUTION REPORT
NAME OF FILER				Date of		Date Stamp CALIFORNIA 107	
Re-Elect Darren Suen for City Council 2020				This Filing	10/05/2020	FORM 49	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)			D 4 N 10	052020-1	For Official Use Only		
(916) 348-9100 1376191			Report No. 10	052020-1			
STREET ADDRESS				☐ Amendme	nt	ATT A	EDVIC OCCIAC
5429 Madison Avenue				to Report No.	- V	CITY CLERK'S OFFIC OCT 05 2020 PM12:1	
ITY STATE ZIP CODE			(explain below)				
Sacramento		CA	95841	No. of Pages	1		
1. Contributio	on(s) Received						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CON' (IF COMMITTEE, ALSO ENTER I,D. NUMBER)			RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/05/2020	Kelley Ventures, LL 2730-11th Avenue Sacramento, CA 9581	_			☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		2,500.00
10/05/2020	Professional Engine 455 Capitol Mall, S Sacramento, CA 9581 Committee ID # 8225	uit 501 4	a Government PECG	-PAC	☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC		Provide interest rate 1,000.00 Check if Loan Provide interest rate
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC		☐ Check if Loan ———————————————————————————————————
Reason for Amend	dment:					*Contributor Codes IND – Individual COM – Recipient Committee (of OTH – Other (e.g., business er PTY – Political Party SCC – Small Contributor Commi	ntity)