497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

| NAME OF FILER Rod Brewer for Elk Grove City Council 2022 | | | | Date of This Filing 11/29/2022 Report No. 301693-AB | | Date Stamp | CALIFORNIA 497 FORM For Official Use Only | | |
|---|--|----------------|--|--|-------------------------------|---|---|--|--|
| | | | | | | | | | |
| REA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1439444 | | | | | | | | | |
| STREET ADDRESS | | | X Amendment to Report No. 301693-AB | | | | CLERK'S OFFICE 30 2022 AMO3:07 | | |
| CITY | | STATE ZIP CODE | | (explain below) No. of Pages1 | | | | | |
| Elk Grove | | CA | 95624 | No. of Pages | | | | | |
| 1. Contributi | on(s) Received | | | | | × | | | |
| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO (IF COMMITTEE, ALSO ENTER LD, NUMBER) | | | TOR | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | | AMOUNT RECEIVED | |
| 09/30/2022 | Dalla Dental Group, Inc. 2733 Elk Grove Blvd., #180 Elk Grove, CA 95758 | | | | ☐ IND☐ COM☐ OTH☐ PTY☐ SCC | | | 1,000.00 Check if Loan % Provide interest rate | |
| | | | | J | ☐ IND☐ COM☐ OTH☐ PTY☐ SCC | | | Check if Loan % Provide interest rate | |
| | | | | | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | | ☐ Check if Loan ——————————————————————————————————— | |
| Reason for Amendment: Update Contributor Information | | | | | | *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 | | | |