

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Bobbie Singh-Allen for Mayor 2024			<b>Date of This Filing</b> <u>11/05/2024</u>	Date Stamp	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">                     CALIFORNIA FORM 497                 </div> <p style="font-size: 0.8em; margin-top: 5px;">For Official Use Only</p> <p style="font-size: 0.8em; margin-top: 5px;">CITY CLERK'S OFFICE NOV 05 2024 PM02:45</p>
<b>AREA CODE/PHONE NUMBER</b> (916) 348-9100	<b>I.D. NUMBER (if applicable)</b> 1456692	<b>Report No.</b> <u>11042024-1</u>	<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>STREET ADDRESS</b> 5445 Madison Avenue			<b>No. of Pages</b> <u>2</u>		
<b>CITY</b> Sacramento	<b>STATE</b> CA	<b>ZIP CODE</b> 95841			

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
11/04/2024	AT&T California Employee PAC 430 Bush Street, #500 San Francisco, CA 94108 Committee ID # 981470	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		1,000.00  <input type="checkbox"/> Check if Loan  _____% Provide interest rate
11/04/2024	Operating Engineers Local Union No. 3 District 80 PAC 3000 Clayton Road Concord, CA 94519 Committee ID # 891402	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		1,000.00  <input type="checkbox"/> Check if Loan  _____% Provide interest rate
11/04/2024	San Manuel Band of Mission Indians 515 S. Figueroa St., Ste. 1110 Los Angeles, CA 90071	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		4,000.00  <input type="checkbox"/> Check if Loan  _____% Provide interest rate

\*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

Reason for Amendment: \_\_\_\_\_

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STREET ADDRESS <u>5445 Madison Avenue</u>		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
CITY <u>Sacramento</u>	STATE <u>CA</u>	ZIP CODE <u>95841</u>	<b>No. of Pages</b> <u>2</u>	

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
11/04/2024	Philip Morris USA Inc. and its Affiliates 1415 L Street, Ste 1150 Sacramento, CA 95814  <small>Made by its service company, Altria Client Services LLC at same address</small>	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00  <input type="checkbox"/> Check if Loan  _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		  <input type="checkbox"/> Check if Loan  _____% Provide interest rate
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