## **497 Contribution Report**

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

							SINTRIBUTION REPORT
NAME OF FILER				Date of	/ /	Date Stamp CALIFO	
Re-Elect Darren Suen for City Council 2024				This Filing	10/05/2024	FORM <b>43</b>	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)			Report No. 10	052024-1	For	Official Use Only	
(916)348-9100 1376191			Report No. ==	032021 1	8		
STREET ADDRESS 5445 Madison Avenue				☐ Amendmento Report No.		CITY CLERK'S OFFICE	
CITY STATE ZIP CODE				(explain below)	<u> </u>	0CT 06	2024 PM01:24
				No. of Pages	1		
Sacramento CA 95841							
1. Contributio	n(s) Received						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CO			RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/04/2024	AT&T California Employee PAC 430 Bush Street San Francisco, CA 94108 Committee ID # 981470				☐ IND  ☑ COM ☐ OTH	102 a	1,000.00
		· V			☐ PTY ☐ SCC		% Provide interest rate
		(4)			☐ IND☐ COM☐ OTH☐ PTY☐ SCC	. T	Check if Loan  **Provide interest rate**
	*	00		¥	☐ IND☐ COM☐ OTH☐ PTY☐ SCC	š	☐ Check if Loan  ———————————————————————————————————
Reason for Amend	lment:					*Contributor Codes IND – Individual COM – Recipient Committee (ot OTH – Other (e.g., business en PTY – Political Party SCC – Small Contributor Commit	tity)