

497 Contribution Report

Amounts may be rounded to whole dollars.

CITY CLERK
MORENO VALLEY

NAME OF FILER Victoria Baca 2016 Moreno Valley City Council, District 1		Date of This Filing 09/15/16	Date Stamp RECEIVED 16 SEP 20 AM 7:56	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1383133	Report No. 003- 004		
STREET ADDRESS [REDACTED]		<input checked="" type="checkbox"/> Amendment to Report No. 004 (explain below)		
CITY Moreno Valley	STATE CA	ZIP CODE 92557	No. of Pages 1	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/14/16	Circle K [REDACTED] Moreno Valley, CA 92557	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/14/16	Carl Rowe [REDACTED] Moreno Valley, CA 92557	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Intergrated Care Communities	500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/14/16	Pen Group, LLC [REDACTED] Yorba Linda CA 92886	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <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: This is report number 004. Inadvertently filed as 003.