497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Serratto for Mayor 2024		Date of This Filing 09/24/2024	Date Stamp	CALIFORNIA FORM **497**
AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)* 1433465	Report No. 3		For Official Use Only CITY OF MERCED
STREET ADDRESS		☐ Amendment to Report No. _____		SEP 25 '24 AM 8:12
CITY STATE ZIP CODE		*(explain below)* 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
09/23/2024	California Apartment Association PAC 455 Capitol Mall, Ste 600 Sacramento, CA 95814	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		2500 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ 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: _____

FPPC Form 497 (Feb/2019)
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www.fppc.ca.gov