497 Contribution Report

Amounts may be rounded to whole dollars.

						497 CC	ONTRIBUTION REPORT
NAME OF FILER			Date of		Date Stamp	CALIFORNIA 497	
		the Canyons Trustee 2024	This Filing _	10/17/2024		FORM 491	
AREA CODE/PHONE NUMBER (661)347-6093		I.D. NUMBER (if applicable) 1469132	Report No. 00	08	E-Filed 10/17/2024	For Official Use Only	
STREET ADDRESS			☐ Amendme to Report No.		10:28:16 Filing ID: 212325281		
CITY	TY STATE ZIF		(explain below)	_			
Newhall		CA 91321	No. of Pages	1			
1. Contributi	ion(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
10/16/2024	PACE of California School Employees Association Small Contributor Committee Sacramento, CA 95814 Committee ID # 761128			☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC			1,300.00
							% Provide interest rate
10/16/2024	Southern Californi Los Angeles, CA S Committee ID # 760	ia Pipe Trades District Council #1 90020 0715	.6 PAC	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC			1,000.00 Check if Loan Provide interest rate
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan
Reason for Amer	ndment:				*Contributor Codes IND – Individual COM – Recipient Co OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	ousiness ent	ity)