

497 Contribution Report

Amounts may be rounded to whole dollars.

0218-4

RECEIVED BY
LOS ANGELES COUNTY
Date Stamp

NAME OF FILER
Mike Murchison for Water Replenishment District 2022

AREA CODE/PHONE NUMBER (562) 983-0815
I.D. NUMBER (if applicable) 1450013

STREET ADDRESS

CITY Long Beach **STATE** CA **ZIP CODE** 90802

Date of This Filing 09/12/2022

Report No. 09-12-MM

Amendment to Report No. _____
(explain below)

No. of Pages 1

2022 SEP 12 PM 4:5
CAMPAIGN FINANCE

CALIFORNIA FORM 497
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C11744

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
09/09/2022	Naples Restaurant Group, LLC dba Boathouse on the Bay (John Morris) Long Beach, CA 90803	<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
09/09/2022	Kristie Kinney Pabst Long Beach, CA 90803	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker Pabst, Kinney & Associates	1,000.00 <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

Reason for Amendment: _____

*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