

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Cabrera for Mayor 2022			Date of This Filing 9/22/22	Date Stamp	<b>CALIFORNIA FORM 497</b> <small>For Official Use Only</small>
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1440069		Report No. _____		
STREET ADDRESS [REDACTED]			<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>		
CITY Moreno Valley	STATE CA	ZIP CODE 92551	No. of Pages 1		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>( F COMMITTEE, ALSO ENTER I D. NUMBER)</small>	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>( F SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
9/22/22	Shade Awad [REDACTED] Riverside, CA 92508	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Empire Gardens	1,000.00  <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small>
		<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 _____% <small>Provide interest rate</small>
		<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 _____% <small>Provide interest rate</small>

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