

497 Contribution Report

Amounts may be rounded to whole dollars.

CITY CLERK
MORENO VALLEY
RECEIVED

497 CONTRIBUTION REPORT

NAME OF FILER COMMITTEE FOR ETHICS AND ACCOUNTABILITY IN GOVERNMENT, SUPPORTING SBE SCHEDULE A		Date of This Filing <u>11/02/2016</u>	Date Stamp 16 NOV -3 AM 7:39	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1391795	Report No. <u>LCR #1188</u>		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY SAN RAFAEL	STATE CA	ZIP CODE 94901	No. of Pages <u>1</u>	

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
11/01/2016	VICTORIA BACA 2016 MORENO VALLEY CITY COUNCIL DISTRICT 1 (ID# 1383133) [REDACTED] Moreno Valley, CA 92557	VICTORIA BACA City Council Member: CITY OF MORENO VALLEY District 1	4,000.00	
	City of Moreno Valley TO: <u>City Clerk</u> FAX: <u>(957) 413-3006</u>			

Reason for Amendment: 8279.09

DAVID DAS
11/2