497 Contribution Report

		Amounts may be	e rounded	to whole dollars.			497 CO	NTRIBUTION REPORT	
NAME OF FILER Committee to Elect Robert Thayer Kings County District 5 Supervisor 2024			Date of This Filing 09/16/2024 01:03		1:03	Date Stamp		CALIFORNIA 497	
AREA CODE/PHONE NU	MBER	LO. NUMBER (If applicable) 1458571	-1	rt No. ²⁰⁹			Establish to	Ollicial Use Only	
CITY Hanford, CA 93230		CODE	to Re	Amendment port No. n below) of Pages 2					
1. Contributio	n(s) Received					;			
DATE RECEIVED	FULL NAME, STREET ADDRE (IF COMMITTEE, A	SS AND ZIP CODE OF CONTRIBUTOR LLSO ENTER I.D. NUMBER)		CODE .	ENTE (IF SELF-EI	IF AN INDIVIDI ER OCCUPATION AI MPLOYED, ENTER I	VAL, ND EMPLOYER NAME OF BUSINESS)	AMOUNT RECEIVED	
2024-09-16	Kings County Detention Deputy Hanford, CA 93230			IND COM TO OTH PTY SCC		New York Control of the Control of t		1,000.00	
	Renewable Solar Inc							Provide Interest Rate	
2024-09-16	Hanford, CA 93230			COM SOTH PTY SCC				Check if Loan	

Reason for Amendment:	* Contributor Codes [ND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party	
	SCC - Small Contributor Committee	-
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AME OF FILER COMMITTED TO Elect Robert That FEA CODE/PHONE NUMBER TREET ADDRESS	yer Kings County District 5	I.D. NUMBER (if applicable		Date of This Filling 09/16/2024 01:03	Date Stamp	497 CONTRIBUTION REPOR	
		1				CALIFORNIA 497	
REET ADDRESS		REA CODE/PHONE NUMBER (If applicable) 1458571				. For Official Use Only	
STREET ADDRESS STATE ZIP GODE Hanford, CA 93230				Amendment to Report No.	-		
				(explain below) No. of Pages 2			
Contribution(s) Mac	le		1				
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)	
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	THE ANTHONY PROPERTY OF THE PR	and the second seco					
				200			
					, ,	1.000	

Reason for Amendment: .

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