

# 497 Contribution Report

Amounts may be rounded to whole dollars.

<b>NAME OF FILER</b> Committee to Elect Gina Dockstader 2022 IID Director Div. 3	<b>Date of This Filing</b> 10/17/2022	<b>Date Stamp</b>	<b>CALIFORNIA FORM 497</b>
<b>AREA CODE/PHONE NUMBER</b> 7 [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1445519	For Official Use Only	
<b>STREET ADDRESS</b> [REDACTED]	<b>STATE</b> [REDACTED]	<b>RECEIVED</b> OCT 17 2022	
<b>CITY</b> [REDACTED]	<b>ZIP CODE</b> [REDACTED]	By _____	

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
10/17/2022	Mark McBroom 6522 Corn Road Calipatria, CA. 92233	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farmer Bloom to Box	1000 <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 _____%
		<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 _____%

\* 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

Reason for Amendment: Campaign received \$1,000.00 contribution