

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Committee to Elect Carlos Duran for IID Division 1, 2026		Date Stamp _____	
AREA CODE/PHONE NUMBER _____		Date of This Filing 05/22/26	
I.D. NUMBER (if applicable) 1489251		Report No. 004	
STREET ADDRESS _____		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY _____		No. of Pages 2	
STATE _____		ZIP CODE _____	

CALIFORNIA **497**
FORM

For Official Use Only

MAY 22 2026

Imperial County

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
05/21/26	Imperial Valley Computer Manufacturing, LLC [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	\$5,000.00	<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 _____%
		<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: _____