

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Committee to Elect Robert Menville County Assessor, 2026	Date of This Filing 05/27/26	Date Stamp _____
AREA CODE/PHONE NUMBER _____	I.D. NUMBER (if applicable) 1489535	Report No. _____ <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages _____ 1
STREET ADDRESS _____		
CITY _____	STATE _____	ZIP CODE _____

CALIFORNIA FPCSM **497**



MAY 27 2026



## 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
5/26/26	La Brucherie Produce, LLC 1407 S. La Brucherie Road El Centro, CA 92243-9677	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	N/A	1,000.00 <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: \_\_\_\_\_