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1

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AUG/07/2020/FRI 03:48 PM Deane & Company

FAX No. 19163331344

P. 001/001

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Re-Elect Mayor Steve Ly 2020		Date of This Filing 08/07/2020	Date Stamp	<b>CALIFORNIA FORM 497</b> For Official Use Only  CITY CLERK'S OFFICE AUG 07 2020 PM04:43
AREA CODE/PHONE NUMBER (916) 285-5733	I.D. NUMBER (if applicable) 1387325	Report No. 684355-IM		
STREET ADDRESS 1787 Tribute Road, Suite K		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages 1	
CITY Sacramento	STATE CA	ZIP CODE 95815		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
08/07/2020	International Market, LLC 4818 E. Tulare Avenue Fresno, CA 93727	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		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

Reason for Amendment: \_\_\_\_\_

\*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