197 Contribution	Report Amounts	may be rounded to wi	iole dollars.		<u>.</u>
AME OF FILER	ect Daryl Busch Mayor 2016	Date of This Filing 1	0/10/2016	Date Stamp CALIFO	
EA CODE/PHONE NUMBER	I.D. NUMBER (# applicable)	Report No.	9 /	RECENT	Official Use Only
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СТН	T, LLC				\$500.00
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			☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		☐ Check if Loa
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eason for Amendment:				**Contributor Codes IND - Individual COM - Recipient Committee (other OTH - Other (e.g., business entity PTY - Political Party SCC - Small Contributor Committee	er than PTY or SC

197 Contributi	ion Report Amounts n	nay be rounded to wh	iolė dollars.		
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COMMITTEE TO REAL CODE/PHONE NUMBER TREET ADDRESS	e-Elect Daryl Busch Mayor 2016 BER I.D. NUMBER (if applicable) 991516 STATE ZIP CODE	Report No Amendmento Report No. (explain below) No. of Pages _	9	RECEIVED OCT 1 2 2016 CITY CLERK'S OFFICE CITY OF PERRIS	Official Use Only
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10/11/2016	Forrance Homes, LLC		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		\$500.00
10/11/2016	Melrose Homes, LLC		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		\$500.00
10/11/2016	MEF Homes, LLC		☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$500.00 Check if Loan Provide interest rate
eason for Amendmer	nt:			**Contributor Codes IND - Individual COM - Recipient Committee (other OTH - Other (e.g., business entity PTY - Political Party SCC - Small Contributor Committee	()

NAME OF FILER Committee to Re-El	ect Daryl Busch Mayor 2016	Date of This Filing	0/10/2016	2.7 DB//	FORNIA 497
AREA CODE/PHONE NUMBER STREET ADDRESS CITY	I.D. NUMBER (if applicable) 991516 STATE ZIP CODE	Report No Amendmen to Report No. (explain below) No. of Pages	9 nt 	OCT 1 2 OCT OF PERRIS	For Official Use Only
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTI (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER IF SELF-EMPLOYED, ENTER NAME OF BUSINESS	

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/11/2016	AVTHREE, LLC	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		\$500.00 Check if Loan Provide interest rate
10/11/2016	MV Homes, LLC	☐ IND☐ COM☐ SOTH☐ PTY☐ SCC		\$500.00 Check if Loan Provide interest rate
10/11/2016	RVONE Homes, LLC	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$500.00 Check if Loan

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Reason for Amendment:	1	10.00

**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

497 Contributio	n Report Amour	nts may be rounded to w	hole dollars.	100 V	
NAME OF FILER Committee to Re- AREA CODE/PHONE NUMBE STREET ADDRESS CITY 1. Contribution(s	991516	Date of This Filing Report No. — Amendment to Report No. (explain below) No. of Pages	4	Date Stamp RECEIVED OCT 1 2 2016 CITY CLERK'S OFFICE	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CON (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	NTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/11/2016	ctory Homes, LLC		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$500.00 Check if Loan Provide interest rate
10/11/2016	ONE Homes, LLC		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$500.00 Check if Loan ** Provide interest rate
10/11/2016	TWO Homes, LLC		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$500.00 Check if Loan Provide interest rate
Reason for Amendment:				**Contributor Codes IND — Individual COM — Recipient Committee (other OTH — Other (e.g., business entity PTY — Political Party SCC — Small Contributor Committee	γ)