

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Mokhberry for City Council 2022		Date of This Filing <u>11/04/2022 08:20</u>	Date Stamp	CALIFORNIA FORM 497											
AREA CODE/PHONE NUMBER [REDACTED]		I.D. NUMBER (if applicable) 1451571	Report No. <u>109</u>	For Official Use Only											
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages <u>3</u>													
CITY [REDACTED]	STATE [REDACTED]	ZIP CODE [REDACTED]	<i>Rec'd by email 11/04/2022 8:22 pm</i>												
1. Contribution(s) Received <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">DATE RECEIVED</th> <th style="text-align: left; width: 45%;">FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th> <th style="text-align: left; width: 15%;">CONTRIBUTOR CODE *</th> <th style="text-align: left; width: 25%;">IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th> <th style="text-align: left; width: 10%;">AMOUNT RECEIVED</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">2022-11-04</td> <td>Javad Mokhberry [REDACTED]</td> <td style="text-align: center;"> <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC </td> <td style="text-align: center;"> Owner Futek, Inc </td> <td style="text-align: center;"> 30,000.00 <input checked="" type="checkbox"/> Check if Loan _____ % Provide Interest Rate </td> </tr> </tbody> </table>						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	2022-11-04	Javad Mokhberry [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Futek, Inc	30,000.00 <input checked="" type="checkbox"/> Check if Loan _____ % Provide Interest Rate
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2022-11-04	Javad Mokhberry [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Futek, Inc	30,000.00 <input checked="" 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

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CITY [REDACTED]	STATE [REDACTED]	ZIP CODE [REDACTED]	No. of Pages 3	

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment: _____

FORM	REFERENCE	NOTES
CA 497	TEXT -107	Contribution in the form of a Loan Received. Interest on Loan is: