497 Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER				Date of This Filing	10/6/2022	Date Stamp	CALIFORNIA FORM **497**
Raymond Buenaventura Committee to Relect Ray Buenaventura DC Council						CITY OF DALY CITY CITY CLERK	
AREA CODE/PHONE NUMBER ▓		I.D. NUMBER *(if applicable)* 1440503		Report No. _____			For Official Use Only
STREET ADDRESS ▓				☐ Amendment to Report No. _____ (explain below)		2022 OCT -6 PM 12: 14 RECEIVED	
CITY Daly City	STATE CA	ZIP CODE 94017		No. of Pages _____	1		

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
10/6/2022	TAZ Frabrication LLC ▓ Shady Cove, OR 97539	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Frabricator	2500.00 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ 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: _____

_____

FPPC Form 497 (March/2011)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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NAME OF FILER Raymond Buenaventura Committee to Relect Ray Buenaventura DC Council	Date of This Filing __10/6/2022__

CALIFORNIA FORM 497

AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*
6508987767	1440503

Report No. _____

Date Stamp

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STREET ADDRESS

PO Box 686

☐ Amendment
to Report No. _____
(explain below)

CITY	STATE	ZIP CODE
Daly City	CA	94017

No. of Pages ___1___

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: _____

FPPC Form 497 (March/2011)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)