### 1. Contribution(s) Received

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED</th>
</tr>
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<tbody>
<tr>
<td>10/6/2022</td>
<td>TAZ Frabrication LLC, Shady Cove, OR 97539</td>
<td>□ IND</td>
<td>Fabricator</td>
<td>2500.00</td>
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<td></td>
<td></td>
<td>□ COM</td>
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<tr>
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<td></td>
<td>□ OTH</td>
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<td>□ PTY</td>
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<td></td>
<td>□ SCC</td>
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</tr>
</tbody>
</table>

Reason for Amendment:

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**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 Contribution Report

**NAME OF FILER**
Raymond Buenaventura Committee to Reelect Ray Buenaventura DC Council

**AREA CODE/PHONE NUMBER**
6508987767

**I.D. NUMBER (if applicable)**
1440503

**STREET ADDRESS**
PO Box 686

**CITY**
Daly City

**STATE**
CA

**ZIP CODE**
94017

**DATE OF THIS FILING**
10/6/2022

**Report No.**

**Amendment to Report No.**
(explain below)

**No. of Pages**
1

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## 2. Contribution(s) Made

<table>
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<tr>
<th>DATE MADE</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION</th>
<th>AMOUNT OF CONTRIBUTION</th>
<th>DATE OF ELECTION (IF APPLICABLE)</th>
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**Reason for Amendment:**

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