

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Oneto for Suoervisor 2022		Date of This Filing <u>04/26/22</u>	Date Stamp  <b>RECEIVED</b>  APR 26 REC'D <i>2022</i>  AMADOR COUNTY RECORDER / CLERK	<b>CALIFORNIA FORM 497</b>  For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1445158	Report No. <u>5</u>		
STREET ADDRESS [REDACTED]		<input checked="" type="checkbox"/> Amendment to Report No. <u>4</u> <small>(explain below)</small>		
CITY Drytown	STATE CA	ZIP CODE 95699		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
4/22/2022	Plymouth San & Gravel, 3900 Highway 16, Plymouth, CA 95669	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00  <input type="checkbox"/> Check if Loan  _____% <small>Provide interest rate</small>
4/22/2022	Campbell Construction General Engineering, Inc. [REDACTED] Sutter Creek, CA 5685	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		830.00  <input type="checkbox"/> Check if Loan  _____% <small>Provide interest rate</small>
4/22/2022	Campbell Construction General Engineering, Inc. [REDACTED] Sutter Creek, CA 95685	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Work/Materials Value	750.00  <input type="checkbox"/> Check if Loan  _____% <small>Provide interest rate</small>

Reason for Amendment: Address

**\*\*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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AREA CODE/PHONE NUMBER 209-304-5623	I.D. NUMBER (if applicable) 1445158	Report No. <u>5</u>		
STREET ADDRESS [REDACTED]		<input checked="" type="checkbox"/> Amendment to Report No. <u>4</u> <small>(explain below)</small>		
CITY Drytown	STATE CA	ZIP CODE 95699	No. of Pages <u>2</u>	

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
4/22/2022	Judy Phelps, [REDACTED] Burson, CA 95225	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1100.00  <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

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