

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Unity PAC, a sponsored committee of the Alameda Labor Council, AFL-CIO		Date of This Filing 07/05/2019	Date Stamp <b>RECEIVED</b>  JUL - 5 2019  CITY CLERK CITY OF EMERYVILLE	CALIFORNIA FORM <b>497</b>  For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1294190	Report No. 29893		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY [REDACTED]	STATE [REDACTED]	ZIP CODE [REDACTED]	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)
06/24/2019	East Bay Working Families, A Coalition of Unions and Community Groups (ID# 1390351) [REDACTED]	Referendum Against Minimum Wage Ordinance TSD City of Emeryville	10,000.00	
Contribution made by sponsor's general fund and reported pursuant to Cal. Gov. Code Sec. 84222(f). No individual sources of \$1,000 or more identified.				

Reason for Amendment: \_\_\_\_\_

\*\* INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY \*\*

STATUS Received

PAGES 4

DURATION 88

REMOTE CSID

TIME RECEIVED July 5, 2019 at 10:11:32 AM PDT

P. 001  
FAX No. JUL/05/2019/FRI 10:05 AM

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<b>STREET ADDRESS</b> _____		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> _____	<b>STATE</b> _____	<b>ZIP CODE</b> _____	<b>No. of Pages</b> <u>3</u>	

## 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
03/14/2019	American Federation of State County and Municipal Employees Council 57 PAC _____ Committee ID # 1313474	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/13/2019	United Food and Commercial Workers Local 5 PAC _____ Committee ID # 1294035	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/13/2019	Faculty for Our University's Future Local Committee, sponsored by the California Faculty Association _____ Committee ID # 1233722	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00  <input type="checkbox"/> 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: \_\_\_\_\_

P. 002

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STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY [REDACTED]	STATE [REDACTED]	ZIP CODE [REDACTED]	No. of Pages <u>3</u>	

**1. Contribution(s) Received**

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05/13/2019	Theatrical Stage Employees Local 16 IATSE PAC Account [REDACTED] Committee ID # 1302106	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/13/2019	United Food and Commercial Workers Local 5 PAC [REDACTED] Committee ID # 1294035	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/13/2019	Operating Engineers Local 3 District 20 PAC [REDACTED] Committee ID # 891396	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		2,500.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate

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P. 003

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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
05/14/2019	Sailor's Union of the Pacific Political Fund [REDACTED] Committee ID # 742282	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		750.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
06/03/2019	SEIU Local 2015 State PAC Small Contributor Committee [REDACTED] Committee ID # 1374983	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		2,500.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
06/14/2019	Alameda Labor Council, AFL-CIO [REDACTED]  Contribution made from sponsor's general fund and reported pursuant to Cal. Gov. Code Sec. 84222(f). No individual sources of \$1,000 or more identified.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate

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FAX No.  
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