

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Committee: Sukhdeep Kaur for Emeryville City Council 2022 AREA CODE/PHONE NUMBER [REDACTED] STREET ADDRESS [REDACTED] CITY STATE ZIP CODE [REDACTED]		Date of This Filing <u>08/29/2022</u>  Report No. <u>1</u>  <input type="checkbox"/> Amendment to Report No. _____ (explain below)  No. of Pages <u>1</u>	Date Stamp <b>RECEIVED</b>  AUG 29 2022  CITY CLERK CITY OF EMERYVILLE	CALIFORNIA FORM <b>497</b>  For Official Use Only
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## 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
08/29/2022	Sukhdeep Kaur [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney	2000 <input checked="" type="checkbox"/> Check if Loan <u>3.5</u> % 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

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