

497 Contribution Report

Amounts may be rounded to whole dollars.

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|--|--|---|-------------------|---|
| NAME OF FILER Carol A. Gamble | | Date of This Filing 10/10/2024 | Date Stamp | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER 949-459-8300 | I.D. NUMBER (if applicable) 1343645 | Report No. 2 | | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Mission Viejo | STATE CA | ZIP CODE 92691 | 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 |
|---------------|---|---|--|---|
| 10/10/2024 | Apartment Association of Orange County PAC 980470 [REDACTED] Anaheim, CA 92805 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| 10/10/2024 | Association of Orange County Deputy Sheriffs PAC 782021 [REDACTED] Santa Ana, CA 92701 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| 10/10/2024 | The Lincoln Club of Orange County State PAC 970861 [REDACTED] Irvine, CA 92618 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1,000.00 <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