

# 497 Contribution Report

Amounts may be rounded to whole dollars.

<b>NAME OF FILER</b> Leadership For Antioch - Sean Wright for Mayor 2016		<b>Date of This Filing</b> 10/19/16	<b>RECEIVED</b> OCT 19 2016 CITY OF ANTIOCH CITY CLERK	CALIFORNIA <b>FORM 497</b>
<b>AREA CODE/PHONE NUMBER</b> (925) 757-3309	<b>I.D. NUMBER (if applicable)</b> 1384338	<b>Report No.</b> 5		For Official Use Only
<b>STREET ADDRESS</b> 3432 Hillcrest Ave, Ste 200		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
<b>CITY</b> Antioch	<b>STATE</b> CA	<b>ZIP CODE</b> 94531	<b>No. of Pages</b> 1	

## 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
10/19/16	Somerville Town Center EQ, LLC 55 Fifth Ave, 15th Floor New York, NY 10003	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		4500 <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

**\*\*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: \_\_\_\_\_