

# 497 Contribution Report

Amounts may be rounded to whole dollars.

<b>NAME OF FILER</b> Joy Motts for Antioch School Board 2016	<b>Date Stamp</b> <b>FILED</b> 16 OCT 13 PH 3:58 CONTRA COSTA COUNTY ELECTION DEPARTMENT	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> I.D. NUMBER (if applicable) 1378707	<b>Date of This Filing</b> 10/13/2016	
<b>STREET ADDRESS</b>	<b>Report No.</b> 1	
<b>CITY</b>	<input type="checkbox"/> <b>Amendment to Report No.</b> (explain below)	
<b>STATE</b>	<b>No. of Pages</b> 1	
<b>ZIP CODE</b>		

## 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
09/28/2016	Sheet Metal Workers' International Association Local No. 104 2610 Crow Canyon Road, Ste. 300 San Ramon, CA 94583-1547 FPPC Id. # 850381	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<b>\$1,000.00</b> <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: \_\_\_\_\_