

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

|  |   |                            |  |   |   |
|--|---|----------------------------|--|---|---|
| <b>NAME OF FILER</b><br>Dominique King Candidate for Antioch School Board 2022 |   |                            | <b>Date of This Filing</b> <u>10/18/2022</u>                                     | Date Stamp<br><br><div style="border: 2px solid red; padding: 5px; color: red; width: fit-content; margin: auto;">                     E-Filed<br/>                     10/18/2022<br/>                     21:45:22<br/><br/>                     Filing ID:<br/>                     205199170                 </div> | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br>(510)258-7712                                 | <b>I.D. NUMBER (if applicable)</b><br>1451534 | <b>Report No.</b> <u>1</u> |  |   |   |
| <b>STREET ADDRESS</b><br>_____   |   |                            | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |   |   |
| <b>CITY</b><br>Antioch   | <b>STATE</b><br>CA                            | <b>ZIP CODE</b><br>94509   | <b>No. of Pages</b> <u>1</u>   |   |   |

## 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br><small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br><small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED   |
|---------------|--|---|--|---|
| 10/14/2022    | Stop the #Karen Recall of Mayor Lamar Thorpe 2022<br>Antioch, CA 94531<br>Committee ID # 1444264               | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | 4,900.00<br><br><input type="checkbox"/> Check if Loan<br><br>_____%<br>Provide interest rate |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br><br>_____%<br>Provide interest rate                 |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br><br>_____%<br>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: \_\_\_\_\_