

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <i>Sarabjit Kaur Cheema for Mayor 2020</i>		Date of This Filing <i>9-30-2020</i>	Date Stamp Received 9/30/2020 City Clerk - AMB	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PREFIX NUMBER [REDACTED]	I.D. NUMBER (if applicable) <i>Pending</i>	Report No. <i>1</i>		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>		
CITY <i>UNION CITY</i>	STATE <i>CA</i>	ZIP CODE <i>94587</i>	No. of Pages <i>1</i>	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR OF COUNTRY, ALSO ENTER ID NUMBER	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER IF SELF-EMPLOYED, ENTER NAME OF BUSINESS	AMOUNT RECEIVED
<i>9-10-2020</i>	<i>Sarabjit Kaur Cheema</i> [REDACTED] <i>Union City CA 94587</i>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>Trustee, New Haven USD</i>	<i>14650.00</i> <input checked="" type="checkbox"/> Check if Loan <i>0</i> <small>Provide interest rate</small>
		<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 <small>Provide interest rate</small>
		<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 <small>Provide interest rate</small>

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