

497 Contribution Report

Type or print in Ink.
Amounts may be rounded to whole dollars.

NAME OF FILER Committee to Elect Rozzana verder-Aliga for Vallejo City Council		Date of This Filing 9/10/2013		RECEIVED 2013 SEP 11 P OFFICE OF THE CITY CLERK CITY OF VALLEJO For Official Use Only
AREA CODE/PHONE NUMBER (707) 552-1105		ID. NUMBER (if applicable) 1358434		
STREET ADDRESS 120 Sheila Court		Report No. 2		
CITY Vallejo,		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
STATE CA		No. of Pages 1		
ZIP CODE 94591				

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
9/10/2013	Ocampo-Estia Corporation 1419 Tennessee St. Vallejo, 94590	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 1,000 <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: _____