


# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <b>Amanda Hopper</b>		Date of This Filing <b>04/5/2022</b>	
AREA CODE/PHONE NUMBER 5306312033		I.D. NUMBER (if applicable) 1362796	
STREET ADDRESS			
CITY <b>Yuba City</b>		STATE ZIP CODE <b>CA 95991</b>	
Report No. <b>2</b>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
No. of Pages <b>1</b>		Date Stamp <div style="text-align: center;"> <b>FILED</b>            REGISTRAR OF VOTERS  <b>APR 05 2022</b>            DONNA M. JOHNSTON            DEPUTY CLERK         </div>	
<b>1. Contribution(s) Received</b>		For Official Use Only <div style="text-align: center;">  </div>	

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
04/4/2022	Amanda L Hopper Yuba City, CA 95991	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Candidate (Sutter County District Attorney)	4800 <input checked="" type="checkbox"/> Check if Loan 0 _____% <small>Provide interest rate</small>
4/5/2022	H. Ted Hansen Lincoln, CA 95648	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Superior Court Judge	1000 <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