

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Amanda Hopper		Date of This Filing 04/25/2022	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 5306312033	I.D. NUMBER (if applicable) 1362796	Report No. 5	FILED REGISTRAR OF VOTERS APR 25 2022	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	DONNA M. JOHNSTON <i>(Signature)</i> DEPUTY CLERK	
CITY Yuba City	STATE CA	ZIP CODE 95991	No. of Pages 4	

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
04/23/2022	Inderjit Saini Yuba City, CA 95993	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Deluxe Transport LLC Owner	1000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
4/23/2022	Gurdev Thiara Yuba City, CA 95993	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Farmer	1000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
4/23/2022	Harpreet Thiara Yuba City, CA 95993	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Thiara Bros Express, Inc.	1000 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Amanda Hopper		Date of This Filing <u>04/25/2022</u>	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 5306312033	I.D. NUMBER (if applicable) 1362796	Report No. <u>5</u>	FILED REGISTRAR OF VOTERS APR 25 2022 DONNA M. JOHNSTON <i>W Smith</i> DEPUTY CLERK	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Yuba City	STATE CA	ZIP CODE 95991	No. of Pages <u>4</u> BY _____	

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
04/23/2022	Harman Basra 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	PTL Transport Inc Owner	1000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
4/23/2022	Jagjit Powar Yuba City, CA 95993	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Jagjit S. Powar, Developer	1000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
4/23/2022	Tirath Chima Yuba City, CA 9991	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Terry Chima Ag Services Farmer	2000 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Amanda Hopper		Date of This Filing 04/25/2022	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 5306312033	I.D. NUMBER (if applicable) 1362796	Report No. 5	FILED REGISTRAR OF VOTERS APR 25 2022 DONNA M. JOHNSTON <i>W. Johnston</i> DEPUTY CLERK	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Yuba City	STATE CA	ZIP CODE 95991	No. of Pages 8 4 BY _____	

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
04/23/2022	Sarbjit Singh 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	New Sutlej Transport, Inc Owner- trucking company	2000 <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small>
4/23/2022	Asma Gorsl Yuba City, CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Diamond Elite Labor Servies, Inc. Labor Contractor	2500 <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small>
4/23/2022	Farooq Bath 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	Rehaan Trucking LLC Owner	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

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Amanda Hopper		Date of This Filing <u>04/25/2022</u>	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 5306312033	I.D. NUMBER (if applicable) 1362796	Report No. <u>5</u>	FILED REGISTRAR OF VOTERS APR 25 2022 DONNA M. JOHNSTON <i>(Signature)</i> DEPUTY CLERK	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Yuba City	STATE CA	ZIP CODE 95991	No. of Pages <u>4</u>	

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
04/23/2022	Amrik Singh Yuba City, CA 95993	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Trucking Co. Owner	1100 <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small>
4/23/2022	Gurbinder Kaur Yuba City, CA 95993	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Kang Transport Inc. Owner Trucking Co.	1000 <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