497 Contrib	ution Report		Amounts in	ay be rounded to	Whole deliate.			
NAME OF FILER DAN FLORES FOR SUPERVISOR 2022				Date of 04 This Filing —	1/18/2022	Date Stamp	CALIFO FORI	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1437740			Report No		FILED For Official Use		official Use Only	
CITY STATE ZIP CODE YUBA CITY CA 95991				Amendment to Report No. (explain below) No. of Pages 2 APR 2 8 2022 DONNA M. JOHNSTON BY DEPUTY CLERK				
1. Contribution	(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			UTOR	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
04/15/22	JASWANT BAINS YUBA CITY, CA 95	993			IND COM OTH PTY SCC	FARMER, BAINS FARMIN	G LP	-1000.00 Check if Loan Provide interest rate
04/15/22	PARMINDER BAIN YUBA CITY, CA 95				IND COM OTH PTY SCC	FARMER, BAINS FARMIN	G	1000.00 ☐ Check if Loan
04/15/22	IQBAL SRA YUBA CITY, CA 95	993			☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	FARMER, SRA FARMS		1000.00 Check if Loan Provide interest rate
				***************************************	•	* Contributor Codes		

Reason for Amendment: CLERICAL ERROR, TYPO ON JASWANT BAINS TOTAL - CHECK #867 WAS \$ 2000. OO TOTAL

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

497 Contributio	n Report
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Amounts may be rounded to whole dollars.

497 Continuu	tion respon						Estimate Anna	
NAME OF FILER DAN FLORES FOR SUPERVISOR 2022				Date of 04/18/2022 This Filing		Date Stamp CALIFO		
AREA CODE/PHONE NU 530-682-1900	REA CODE/PHONE NUMBER I.D. NUMBER (If applicable) 1437740		Report No. 3			For	Official Use Only	
STREET ADDRESS				☑ Amendment to Report No				
CITY STATE ZIP CODE YUBA CITY CA 95991			(explain below) No. of Pages .	2				
1. Contribution(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			UTOR	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
04/15/22	JASKARAN SINGH S		✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	FARMER, SANGHA FARMS YTD DONATIONS: \$2000.00		1000.00 ☐ Check if Loan		
	102.10111, 0.110						% Provide interest rate	
04/15/22	PRABHJIT S DHILLO			☑ IND	CEO, DHILLON FARMS		1000.00	
	YUBA CITY, CA 959			OTH PTY SCC			Check if Loan	
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan % Provide interest rate
						* Contributor Codes		
Reason for Amendr	nent: SEE PAC	35 1				IND - Individual COM - Recipient Comm OTH - Other (e.g., busin PTY - Political Party SCC - Small Contributo	ness entity)	