

497 Contribution Report

Amounts may be rounded to whole dollars.

GE24

NAME OF FILER COMMITTEE TO ELECT RANDA B. WAHBE TO CITRUS COLLEGE BOARD		Date of This Filing 09/24/2024	RECEIVED Date Stamp LOS ANGELES COUNTY 2024 SEP 24 PM 2:49	CALIFORNIA FORM 497 For Official Use Only 021832 C12039
AREA CODE/PHONE NUMBER 626/298-3532	I.D. NUMBER (if applicable) 1473111	Report No. 1	CAMPAIGN FINANCE Email	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)	No. of Pages 1	
CITY MONROVIA	STATE CA	ZIP CODE 91016		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/21/2024	FACULTY ASSOCIATION OF CALIFORNIA COMMUNITY COLLEGES (FACCC) PAC SACRAMENTO, CA 95814 ID#841118	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <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
		<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

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