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497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Santa Monica College Faculty Assn Political Committee		Date of This Filing 10/7/2022	RECEIVED BY LOS ANGELES COUNTY 2022 OCT 11 AM 11:15 CAMPAIGN FINANCE	CALIFORNIA FORM 497 For Official Use Only G05514
AREA CODE/PHONE NUMBER (310)434-4394	ID. NUMBER (if applicable) 950204	Report No. 100722		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY Santa Monica	STATE CA	ZIP CODE 90405	No. of Pages 1	

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/06/2022	Dr Sion Roy for College Board of Trustees 2022 Sacramento, CA 95814 ID# 1450646	Sion Roy Santa Monica College Board of Trustees	10,000	11/8/2022

Reason for Amendment: _____