# 497 Contribution Report

Amounts may be rounded to whole dollars.

| NAME OF FILER | | | Date of This Filing | 10/21/2024 | Date Stamp | CALIFORNIA FORM **497** |
|---|---|---|---|---|---|---|
| Dupont for Merced Council 2024 | | | | | | |

| AREA CODE/PHONE NUMBER | I.D. NUMBER *(if applicable)* | Report No. **3** | For Official Use Only |
|---|---|---|---|
| ▮ | 1463704 | | |

| STREET ADDRESS | | ☐ Amendment to Report No. _____ (explain below) | OCT21'24PM4:32 |
|---|---|---|---|
| ▮ | | | CITY OF MERCED |

| CITY | STATE | ZIP CODE | No. of Pages ___1___ |
|---|---|---|---|
| ▮ | | | |

## 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 |
|---|---|---|---|---|
| 10/18/2024 | Merced Hotel & Lodging Association<br>730 Motel Drive<br>Merced, CA 95341 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | 1,000.00<br><br>☐ Check if Loan<br>_____%<br>Provide interest rate |
| | | ☐ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | | ☐ Check if Loan<br>_____%<br>Provide interest rate |
| | | ☐ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | | ☐ Check if Loan<br>_____%<br>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