

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Bramante for City Council 2022			Date of This Filing 10/31/2022	Date Stamp	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER (310) 906-5459	I.D. NUMBER (if applicable) FPPC #1454173		Report No. 3	CITY OF AGOURA HILLS 2022 OCT 31 PM 2: 18 CITY CLERK'S OFFICE	
STREET ADDRESS 3952 Patrick Henry Place			<input type="checkbox"/> Amendment to Report No. (explain below) N/A	No. of Pages 1	
CITY Agoura Hills	STATE CA	ZIP CODE 91301			

## 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
10/30/2022	David Levine Bramante 3952 Patrick Henry Place Agoura Hills, CA 91301	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Realtor	\$1,500.00 <input checked="" type="checkbox"/> Check if Loan 5.0 _____% <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>
		<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: N/A

\* 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