497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER	Date of This Filing	Date Stamp	CALIFORNIA FORM 497
Committee to Elect Larry Coombes Tuolumne County Supervisor District 1 2024	10/08/2024	Filed OCT 08 2024 Tuolumne County Clerk By Deputy	For Official Use Only
AREA CODE/PHONE NUMBER [redacted] / I.D. NUMBER (if applicable) 1470771	Report No. 2		
STREET ADDRESS [redacted]	☐ Amendment to Report No. (explain below)		
CITY Sonora / STATE CA / ZIP CODE 95370	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
10/08/2024	Robert Dorroh [redacted] Sonora CA 95370	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired	1200.00 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate

* 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

Reason for Amendment: _____