

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER San Bernardino County Professional Firefighters Local 935		Date of This Filing 09/01/2020	Date Stamp <div style="border: 2px solid red; padding: 5px; text-align: center;"> E-Filed 09/01/2020 17:01:41 Filing ID: 192349832 </div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (909)641-4996	I.D. NUMBER (if applicable) 1230110	Report No. 2.20		
STREET ADDRESS		☐ Amendment to Report No. _____ (explain below)		
CITY Fontana	STATE CA	ZIP CODE 92336		

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
09/01/2020	James Previti Ontario, CA 91764	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Frontier Homes	30,460.00 ☐ 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

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

Additional Comments
Form 497 Contribution Report

ADDITIONAL COMMENTS	
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NAME OF FILER

San Bernardino County Professional Firefighters Local 935

Contribution received earmarked for San Bernardino County No on Measure U campaign.