

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Tom Panas for School Board 2016		Date of This Filing 10/22/2016	Date Stamp	<div style="border: 2px solid black; padding: 5px; display: inline-block;"> <p>E-Filed 10/22/2016 15:46:58</p> <p>Filing ID: 162035847</p> </div>	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER (510) 610-9438	I.D. NUMBER (if applicable) 1385583	Report No. 212442-AF			For Official Use Only
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)			
CITY El Cerrito	STATE CA	ZIP CODE 94530	No. of Pages 1		

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
10/21/2016	Parent Teacher Alliance Sacramento, CA 95814 Committee ID # 1367043 In-Kind Contribution	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		6,475.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/21/2016	Students for Education Reform (SFER) Action Network Sacramento, CA 95815 Committee ID # 1368259 In-Kind Contribution	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		305.65 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<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 _____% 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

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NAME OF FILER Tom Panas for School Board 2016			Date of This Filing <u>10/25/2016</u>	Date Stamp <div style="border: 1px solid red; padding: 5px; width: fit-content; margin: 5px auto;"> E-Filed 10/25/2016 16:24:31 Filing ID: 162069918 </div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (510) 610-9438	I.D. NUMBER (if applicable) 1385583		Report No. <u>644463-KC</u>		
STREET ADDRESS _____			<input checked="" type="checkbox"/> Amendment to Report No. <u>644463-KC</u> (explain below)		
CITY El Cerrito	STATE CA	ZIP CODE 94530	No. of Pages <u>1</u>		

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
09/27/2016	Parent Teacher Alliance Sacramento, CA 95814 Committee ID # 1367043 In-Kind Contribution	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,808.73 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<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 _____% Provide interest rate
		<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 _____% Provide interest rate

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Reason for Amendment: Update Contribution Amount

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NAME OF FILER Tom Panas for School Board 2016		Date of This Filing <u>10/25/2016</u>	Date Stamp <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;"> E-Filed 10/25/2016 19:27:16 Filing ID: 162073030 </div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (510) 610-9438	I.D. NUMBER (if applicable) 1385583	Report No. <u>212106-JC</u>		
STREET ADDRESS _____		<input checked="" type="checkbox"/> Amendment to Report No. <u>212106-JC</u> (explain below)		
CITY El Cerrito	STATE CA	ZIP CODE 94530	No. of Pages <u>1</u>	

1. Contribution(s) Received

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10/12/2016	Students for Education Reform (SFER) Action Network Sacramento, CA 95815 Committee ID # 1368259 In-Kind Contribution	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		392.65 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/12/2016	Students for Education Reform (SFER) Action Network Sacramento, CA 95815 Committee ID # 1368259 In-Kind Contribution	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,632.04 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<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 _____% Provide interest rate

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Reason for Amendment: Update Contribution Amount

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NAME OF FILER Tom Panas for School Board 2016			Date of This Filing <u>10/26/2016</u>	Date Stamp <div style="border: 1px solid red; padding: 5px; width: fit-content; margin: 5px auto;"> E-Filed 10/26/2016 16:11:12 Filing ID: 162087980 </div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (510) 610-9438	I.D. NUMBER (if applicable) 1385583		Report No. <u>212578-CC</u>		
STREET ADDRESS _____			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY El Cerrito	STATE CA	ZIP CODE 94530	No. of Pages <u>1</u>		

1. Contribution(s) Received

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10/24/2016	Parent Teacher Alliance Sacramento, CA 95814 Committee ID # 1367043 In-Kind Contribution	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		18,815.32 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<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 _____% Provide interest rate
		<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 _____% Provide interest rate

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Reason for Amendment: _____