

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER BURBANK CITIZENS FOR RESPONSIBLE GOVERNMENT - NO ON RC, SPONSORED BY CALIFORNIA APARTMENT ASSOCIATION		Date of This Filing <u>10/15/2020</u>	Date Stamp <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;"> E-Filed 10/15/2020 14:33:47 Filing ID: 193562740 </div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (916) 473-4298	I.D. NUMBER (if applicable) 1430512	Report No. <u>20101501</u>		
STREET ADDRESS CITY STATE ZIP CODE SACRAMENTO CA 95814		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
		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
10/15/2020	NHW INVESTORS LLC() LOS ANGELES, CA 90067	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00 <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

*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: _____
