

497 Contribution Report

Amounts may be rounded to whole dollars.

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|--|---|---|---|
| NAME OF FILER <u>MCCLE TADDER JR TIBURON CA</u> I.D. NUMBER (if applicable) <u>1348219</u> CITY <u>TIBURON CA 94920</u> | Date of this Filing <u>8/15/24</u> Report No. <u>6</u> <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages <u>1</u> | Date Stamp RECEIVED SEP 26 2024 TOWN MANAGERS OFFICE TOWN OF TIBURON | CALIFORNIA FORM 497 For Official Use Only |
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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 |
|----------------|---|---|--|---|
| <u>8/25/24</u> | <u>OPERATOR ENGINEER 3054 #101K STAIR CONTRACTOR (COMMITTEE)</u> [REDACTED] <u>TIBURON CA 94920</u> | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | <u>22 #891525</u> | <u>\$1,000</u> <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 |

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