497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER			Date of	9/9/24	Date Stamp	CALIFORNIA 497		
Steven Hernandez	LD MIMPED #		This Filing	0/0/27		101(111		
REA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1474184			Report No		RECEIVED	For Official Use Only		
STREET ADDRESS					September 9, 2024			
Coachella		STATE CA	ZIP CODE 92236	(explain below) No. of Pages	1			
1. Contribution	(s) Received							
DATE RECEIVED	FULL NAME	ND ZIP CODE OF CONTRIBU ENTER I.D. NUMBER)	ITOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMI (IF SELF-EMPLOYED, ENTER NAME OF	PLUTER	MOUNT CEIVED	
9/8/24	PRO LANDSCAP	ING INC			☐ IND☐ COM☐ OTH☐ PTY☐ SCC			ck if Loan % : interest rate
9/9/24	Robert Bernheime				IND COM OTH PTY SCC			ck if Loan % interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			ck if Loan % interest rate
Reason for Amendme	ent:					**Contributor Codes IND – Individual COM – Recipient Com OTH – Other (e.g., bu: PTY – Political Party SCC – Small Contribu	siness entity)	TY or SCC)