

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Rick Solomon & Affiliated Entities		Date of This Filing 10/10/2024	Date Stamp 2024 OCT 11 AM 9:57	CALIFORNIA 497 FORM For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable)	Report No. 1		
STREET ADDRESS [REDACTED]		☐ Amendment to Report No. (explain below)		
CITY	STATE	ZIP CODE		
[REDACTED]		No. of Pages 1		

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/9/2024	Our Culver City in Support of Al Vera and Denice Renteria for City Council 2024 FPPCID# 1476210 [REDACTED] Culver City CA 90232		10000	11/5/2024
10/9/2024	Our Culver City in Support of Al Vera and Denice Renteria for City Council 2024 FPPCID# 1476210 [REDACTED] Culver City CA 90232		10000	11/5/2024
10/9/2024	Our Culver City in Support of Al Vera and Denice Renteria for City Council 2024 FPPCID# 1476210 [REDACTED] Culver City CA 90232		10000	11/5/2024

Reason for Amendment: _____