497 Contribut	ion Report	Amounts may be	e rounded	to whole dollars.	DM 1	2 3 497	CONTRIBUTION REPORT			
NAME OF FILER Eleassia Davis for Mayor 2024				Date of This Filing 09/07/2024 05:36 Date Stamp CALIFORNIA 497						
AREA CODE/PHONE NUM STREET ADDRESS	MBER	LD. NUMBER (if applicable) 1469597	to Re	t No. 2 mendment port No.	110168 0110101	NED 5	For Official Use Only			
Tracy, CA 95377	CA 95377 (explain below) No. of Pages 2									
1. Contributio	n(s) Received									
DATE RECEIVED	FULL NAME, STREET ADDRI (IF COMMITTEE,	ESS AND ZIP CODE OF CONTRIBUTOR ALSO ENTER I.D. NUMBER)		CONTRIBUTOR CODE *	IF AN ENTER OCCUP (IF SELF-EMPLOYED)	N INDIVIDUAL, ATION AND EMPLOYER , ENTER NAME OF BUSINESS)	AMOUNT RECEIVED			
2024-09-07	Herman S. Grewal Tracy, CA 95377			IND COM OTH PTY SCC			2,000.00 Check if Loan % Provide Interest Rate			
2024-08-30	Manpreet Shahi Hacy, OA 33377		1	IND COM OTH PTY SCC	1	r Director e America Inc	500.00 Check if Loan % Provide Interest Rate			
2024-09-06	Manpreet Shahi Hacy, CA 95577			IND COM OTH PTY SCC		r Director e America Inc	500.00 Check if Loan % Provide Interest Rate			
Reason for Amendm	nent:				IN CC	Contributor Codes D – Individual DM – Recipient Committee (of H – Other (e.g., business en TV – Political Party CC – Small Contributor Comn	ntity)			

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497 Contributio	on Report	Amounts may be i	rounded to whole dollars.	(W)	PM 1 2 3 8 5 4	97 CONTRIBUTION REPORT		
NAME OF FILER			Date of	2	Date Stamp CAL	IFORNIA 497		
Eleassia Davis for May	yor 2024		This Filing 09/07/2024 05:36	/ = /	SED EIVEN	FORM 49		
AREA CODE/PHONE NUMBER (if applicable)			Report No.	유(0) >20 6	For Official Use Only		
209-814-1060 1469597			☐ Amendment	(m)	TR. C. TRA			
STREET ADDRESS			Amendment to Report No.	1-1	CACE TO			
4107 Heirloom Lane			(explain below)					
CITY STATE ZIP CODE			No. of Pages 2					
Tracy, CA 95377								
2. Contribution	(s) Made							
DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CANDIDATE AND OFFICE OR MEASURE AND JURISDICTIO	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION		DATE OF ELECTION (IF APPLICABLE)		
Reason for Amendme	ent:					ń		