

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <i>Cedric Hicks Sr for City Council</i>		Date of This Filing <i>10/21/16</i>	RECEIVED Date Stamp CITY CLERK OCT 24 AM 7:28 CITY OF CARSON <i>Rec'd via email on 10/21/16</i>
AREA CODE/PHONE NUMBER <i>310 864-9874</i>	I.D. NUMBER (if applicable) <i>1386005</i>	Report No. <i>7 16</i>	For Official Use Only
STREET ADDRESS <i>P.O. BOX 4541</i>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY <i>Carson</i>	STATE <i>CA</i>	ZIP CODE <i>90746</i>	No. of Pages <i>1</i>

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
<i>10/20/16</i>	<i>Faring PROPERTY GROUP, INC.</i> <div style="background-color: gray; height: 20px; width: 100%;"></div>	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<i>\$2,000</i> <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