497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Peninsula Small Business PAC				Date of This Filing	11/05/2016	Date Stamp	CALIFORNIA 497	
AREA CODE/PHONE NUMBER		I.D. NUMBER (if applicable)					For Official Use Only	
(714)540-2295 1390467			Report No. 16-11					
STREET ADDRESS 603 E Alton Ave STE G				Amendment to Report No.		BMANED ON 11-5.16	e e	
CITY		STATE ZIP CODE		(explain below)		11-5.16		
Santa Ana		CA	CA 92705 No. of Pages		1	•		
1. Contributio	n(s) Received				, ,			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBL (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
11/05/2016	Hecho En Mexico LLC				□ IND			5,000.00
					COM OTH PTY			☐ Check if Loan
					□ scc			Provide interest rate
11/05/2016	Thomas Larkin				. IND	Investor		10,000.00
						TCW		☐ Check if Loan ———————————————————————————————————
		·			☐ IND☐ COM☐ OTH☐ PTY☐ SCC			☐ Check if Loan
Reason for Amendi	ment:					*Contributor Codes IND – Individual COM – Recipient Cor OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	usiness enti	ty)