

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Protect Sierra Madre Stop the Housing Project		Date Stamp <b>RECEIVED</b> FEB 28 2023 CITY OF SIERRA MADRE <i>[Signature]</i>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 626/3559733	I.D. NUMBER (if applicable) 1446705	Date of This Filing 02/28/23	
STREET ADDRESS 436 Grove St		Report No. N-6	
CITY Sierra Madre	STATE CA	AMOUNT RECEIVED 6000	<input type="checkbox"/> Check if Loan Provide interest rate _____%
	ZIP CODE 91024		

## 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
02/27/23	Scott Hood [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	portfolio Manager First Wilshire Securities Management Inc.	6000 <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 _____%

\* 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

Reason for Amendment: \_\_\_\_\_

[CLEAR FORM](#) [PRINT FORM](#)