

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Bobbie Singh-Allen for Mayor 2026			Date of This Filing <u>05/12/2026</u>	Date Stamp	CALIFORNIA FORM 497 For Official Use Only CITY CLERK'S OFFICE MAY 12 2026 PM03:44
AREA CODE/PHONE NUMBER (916) 348-9100	I.D. NUMBER (if applicable) 1476984		Report No. <u>05122026-1</u>		
STREET ADDRESS 5445 Madison Avenue			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Sacramento	STATE CA	ZIP CODE 95841	No. of Pages <u>1</u>		

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION <small>(IF APPLICABLE)</small>
05/12/2026	Lisa Kaplan for City Council 2026 (ID# 1462636) 5445 Madison Avenue Sacramento, CA 95841	Lisa Kaplan City Council Member City of Sacramento District 1	1,001.00	06/02/2026

Reason for Amendment: _____