NAME OF FILER Citizens For Laguna's Future			Date of This Filing 10/20/22		Date Stamp	LIFORNIA 107
					CA	FORM 497
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)				18		
1450234			Report No. #18			For Official Use Only
STREET ADDRESS						
			Amendme to Report No.	nt		
CITY		STATE ZIP CODE	(explain below)			
Laguna Beach		CA 92651	No. of Pages	1		
1. Contribution	n(s) Received			Tarring Com.		
DATE RECEIVED				CONTRIBUTOR	IF AN INDIVIDUAL, ENTEROCCUPATION AND EMPLOYER AMOUNT	
				CODE*	(IF SELF-EMPLOYED, ENTER NAME OF BUSINE	ESS) RECEIVED
10/19/22	Douglas Anderson		☑ IND □ COM	COM sen-employed	\$1,500.00	
	Laguna Beach, CA 92651			DOTH PTY SCC		Check if Loan
						Provide interest rate
10/19/22	South Coast Highwa			☐ IND ☐ COM		5,000.00
	Beverly Hills, CA 90		OTH PTY		Check if Loan	
			1000 - 100	□ scc		Provide interest rate
				☐ IND ☐ COM		
				OTH PTY		☐ Check if Loan
				□ scc		Provide interest rate
					* Contributor Codes	
					IND - Individual COM - Recipient Committee (o	ther than PTY or SCC)
Reason for Amendr	ment:				OTH - Other (e.g., business er PTY - Political Party	ntity)

FPPC Form 497 (Feb/2019)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov