

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER PROTECT AND KEEP LAGUNA LOCAL, NO ON MEASURES R & S, SPONSORED BY REGENCY PROPERTIES, L.P. AND AFFILIATED ENTITIES AND DTRS MLB, LLC		Date of This Filing <u>10/27/2022</u>	Date Stamp RECEIVED NOV 01 2022 City Clerk's Office City of Laguna Beach, CA	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (213) 624-6200	I.D. NUMBER (if applicable) 1450051	Report No. <u>10272022</u>	<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
STREET ADDRESS 1278 GLENNEYRE ST., #459		CITY LAGUNA BEACH	STATE CA	ZIP CODE 92651
No. of Pages <u>1</u>				

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
10/26/2022	DTRS MLB, LLC (MARY ROGERS) 30801 S. COAST HIGHWAY LAGUNA BEACH, CA 92651 LOAN	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		20,000.00 <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: _____
