497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER	Date of This Filing	Date Stamp	CALIFORNIA FORM 497
JoAnn Martinez-Stephans, Moreno Valley City Council, District 2, 2026	10/06/2026	E-Filed 10/29/2026 19:25:37 Filing ID: 217854098	For Official Use Only
AREA CODE/PHONE NUMBER: [redacted] / I.D. NUMBER (if applicable): 1492727	Report No. 9		
STREET ADDRESS	☐ Amendment to Report No. _____ (explain below)		
CITY: Moreno Valley / STATE: CA / ZIP CODE: 92557	No. of Pages 1		

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
10/06/2026	Inland Empire business Pac Irvine, CA 92618 Committee ID # 1360854	☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC		3,000.00 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ 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: _____

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