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STREET ADDRESS				Amendment to Report No. (explain below)			
CITY Los Angeles		STATE CA	2IP CODE 90017	No. of Pages			
1. Contribution	ns Received		,				
DATE	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
01/02/2020	Richard K Pa	rrott CA 95608-6135			☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Director CA Department of Food and Agriculture CalCannabis Cultivation Licensing Division	\$1,500.0  Check if Loan
						*Contributor Codes IND - Individual COM - Recipient Committee (o	
Reason for Amendmen	t:				· ·	OTH - Other (e.g., business en PTY - Political Party SCC - Small Contributor Comm	tity)

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