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497 Contribution Report				nts may be rounded to whole dollars.		RECEIVED BY	
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1. Contribution	ns Received						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS	AMDUNT RECEIVED
03/22/2016	Robert A. Bradway				☑ IND □COM □OTH □PTY □SCC	Chairman & CEO Amgen	\$1,500_00 Check if Loan Provide interest rate
03/22/2016	David M. Carlisle				□ IND □ COM □ OTH □ PTY □ SCC	Physician Drew University of Medicine and Science	\$1,000_00 Check if Loan Provide Interest rate
03/22/2016	Rochelle Gluckstein				☑ IND □COM □OTH □PTY □SCC	Real Estate Robert Gluckstein Enterprises	\$1,500.00 Check if Loan Provide Interest rate
Reason for Amendmen	ıt:					*Contributor Codes IND - Individual COM - Recipient Committee (c OTH - Other (e.g., business er PTY - Political Party SCC - Smell Contributor Committee FPPC Advice: advice@fp	ritiee PPC Form 497 (Jan/2016)