

# 497 Contribution Report

<b>NAME OF FILER</b> Yes on U for Sebastopol's Future		<b>Date of This Filing</b> <u>10/02/2024</u>	Date Stamp  <i>Rec'd 10/2/2024</i>	<b>CALIFORNIA FORM 497</b>  For Official Use Only
<b>AREA CODE / PHONE</b> [REDACTED] 9	<b>I.D. Number (if applicable)</b> 1475075	<b>Report No.</b> LATE-20241001		
<b>STREET ADDRESS</b> [REDACTED]		<input type="checkbox"/> <b>Amendment to RptNo.</b> _____		
<b>CITY</b> Sebastopol	<b>STATE</b> CA	<b>ZIP CODE</b> 95472	<b>No. of Pages:</b> 1	

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, OCCUPATION & EMPLOYER or BUSINESS NAME IF COMMITTEE - ID NUMBER	AMOUNT RECEIVED
10/01/2024	Barlow Star LLC [REDACTED] Sebastopol CA 95472	OTH		5,000.00  <input type="checkbox"/> Check if Loan _____ % Provide interest rate

**RECEIVED**  
 OCT X 2 2024  
 BY: .....

**\*\* 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