

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Caryn Mason		Date of This Filing 10/12/18	Date Stamp	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER 909/525-5573	I.D. NUMBER (if applicable) FPPC ID# 1410524	Report No. 1	RECEIVED 18 OCT 15 A 7 33 CITY OF WALNUT CITY CLERKS OFFICE	
STREET ADDRESS 20437 San Gabriel Valley Dr.		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	For Official Use Only	
CITY Walnut	STATE CA	ZIP CODE 91789		
		No. of Pages 1		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
10/11/18	Billary Development Inc. DBA Artek Group 18780 Amar Rd. STE 106 Walnut, CA 91789	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate	1,000 <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

Reason for Amendment: _____

****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