

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Friends of Historic Placerville		Date of This Filing 9/18/2026	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1492862	Report No. 1	CITY CLERK/HUMAN RESOURCES	
STREET ADDRESS [REDACTED]		☐ Amendment to Report No. (explain below)	SEP 20 2026	
CITY Placerville	STATE CA	ZIP CODE 95667	CITY OF PLACERVILLE 3101 CENTER STREET PLACERVILLE, CA 95667	
		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
8/20/2026	Don Tornincasa [REDACTED] PLACERVILLE CA. 95667	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired building owner, [REDACTED] [REDACTED]	\$500 ☐ Check if Loan _____% Provide interest rate
8/26/2026	Kurt Raffetto [REDACTED] Placerville, CA 95667	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Walnut farmer, Raffetto Enterprises	\$500 ☐ Check if Loan _____% Provide interest rate
8/7/2026	Jim Slavin [REDACTED] Placerville, CA 95667	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	IT Architect, Agile Cloud Institute	\$25 ☒ Check if Loan 0_____% 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

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STREET ADDRESS [REDACTED]			☐ Amendment to Report No. _____ (explain below)		
CITY Placerville	STATE CA	ZIP CODE 95667	No. of Pages _____		

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment: _____