

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

|   |   |                          |  |  |   |
|---|---|--------------------------|--|--|---|
| <b>NAME OF FILER</b><br>Eve Marie Little        |   |                          | <b>Date of This Filing</b> <u>10/22/2024</u>                                     | Date Stamp<br><br><div style="border: 2px solid red; padding: 5px; color: red; font-weight: bold;">                     E-Filed<br/>                     10/22/2024<br/>                     11:45:53<br/><br/>                     Filing ID:<br/>                     212365428                 </div> | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br>(832) 728-8483 | <b>I.D. NUMBER (if applicable)</b><br>Pending |                          | <b>Report No.</b> <u>212365116</u>   |  |   |
| <b>STREET ADDRESS</b>                           |   |                          | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |  |   |
| <b>CITY</b><br>Newark                           | <b>STATE</b><br>CA                            | <b>ZIP CODE</b><br>94560 | <b>No. of Pages</b> <u>2</u>   |  |   |

## 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br><small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br><small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED   |
|---------------|--|---|--|---|
| 10/16/2024    | Eve Little<br>Newark, CA 94560   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | University Professor<br>CSUEB  | 4,500.00<br><br><input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate                 |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br>_____%<br>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

**Additional Comments**  
**Form 497 Contribution Report**

ADDITIONAL COMMENTS

**CALIFORNIA**  
**FORM** **497**

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NAME OF FILER

Eve Marie Little

I.D. NUMBER

Pending

This is the candidate's personal money that she submitted to her own personal campaign.