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This Filling 05/31/2022  TAREACOCIEPHONE NUMBER (Pagestades) (310) 489-2607  STREET ADDRESS  CITY STATE ZIP CODE (Coptina below)  Covina CA 91722  TO ONTRIBUTOR (PEXAMERISAL)  DATE RECEIVED (PEXAMERISAL)  Amendment to Report No. 16  DATE PULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE (PEXAMERICAL)  DATE RECEIVED (PEXAMERISAL)  AMOUNT RECEIVED (PEXAMERISAL)  DATE Brooklyn, NY 11204  DEPONDED IND COM OTH PTY COME (PEXAMERISAL)  DEPONDED IND COM OTH PTY COME (PEXAMERISAL)  DEPONDED IND COM OTH PTY OF SCO  COM OTH PTY OTHER COME (PEXAMERISAL)  COM PROVIDE COME (PE	NAME OF FILER				Date of	_08	ANGE Date Stampun Y	CALIFO	RNIA 407
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