## 497 Contribution Report

NAME OF FILER

## Amounts may be rounded to whole dollars.

## CITY OF BELL GARDENS CITY CLERK'S OFFICE

Date Stamp

497 CONTRIBUTION REPORT

NAME OF FILER			Date of This Filing 09/12/2022		2022 SEP 12 PM 4: 4 CALIFORNIA 497	
Jose Cruz for Bell Gardens			This Filing	03/12/2022	ther off it is it who	FORM TO I
AREA CODE/PHONE NUMBER   I.D. NUMBER (# applicable)   (562) 983-0815   1451493			Report No. 09-12-JC		7400 CARCICIO AVE	For Official Use Only
			Keport No. 🐃		7100 GARFIELD AVE BELL GARDENS, CA 90200	
STREET ADDRESS			☐ Amendmer	nt	neer guincus, on anthi	
249 E. Ocean Blvd., #670			to Report No.			
CITY	STATE	ZIP CODE	(explain below)			
Long Beach	CA	90802	No. of Pages 1			
1. Contribution(s) Rec	eived					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		PR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)  AMOUNT RECEIVED	
09/11/2022 George Deitch				X IND	Retired	1,000.00
Tehachapi	, CA 93561			COM OTH PTY	Retired	☐ Check if Loan
			·	SCC		Provide interest rate
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan  % Provide interest rate
Reason for Amendment:					*Contributor Codes IND – Individual COM – Recipient Commit OTH – Other (e.g., busin PTY – Political Party SCC – Small Contributor (	1