

497 Contribution Report

Amounts may be rounded to whole dollars

**CITY OF BELL GARDENS
CITY CLERK'S OFFICE**

497 CONTRIBUTION REPORT

NAME OF FILER Jennifer Rodriguez for Bell Gardens City Council 2022			Date of This Filing 09/26/2022 Date Stamp 2022 SEP 26 PM 6:52	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (562) 983-0815	I.D. NUMBER (if applicable) 1451491	Report No. 09-26-JR (explain below)		
STREET ADDRESS 249 E. Ocean Blvd., #670				
CITY Long Beach	STATE CA	ZIP CODE 90802	No. of Pages 1	

7100 GARFIELD AVE
BELL GARDENS, CA 90201

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
09/23/2022	Guardians of Our Communities [REDACTED] Norwalk, CA 90650 Committee ID # 1438737	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		4,000.00 <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