CITY OF BELL GARDENS
CITY CLERK'S OFFICE
Amounts may be rounded to whole dollars.

497 Contribution Report

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NAME OF FILER		This Filing	10/12/2022 00	13 M 9 Z2	FOR	100 March 1980 1981 - 1980 1980 1980 1980 1980 1980 1980 1980		
LISSETH FLORES-FRANCO FOR CITY COUNCIL 2022 AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)					For	Official Use Only		
AREA CODE/FRONE NO	MOLIX		•	Report No. 10	1122 7400 (ARFIELD AVE RDENS, CA 90201		,
(310) 817-6679 1403078		1	BELL GA	RDENS, CA 90201				
STREET ADDRESS				☐ Amendme	nt			
1 W Manchester Blvd., Suite 700		to Report No. (explain below)	***************************************					
CITY STATE ZIP CODE		No. of Pages1						
Inglewood		CA	90301			The second secon		
1. Contributio	n(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD NUMBER)			TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL. ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
10/11/2022 Linda Clifford 5		X IND	Retired None		1,036.58			
2,722,233	Glendora, CA 91741				COM OTH PTY SCC	None		☐ Check if Loan
								Provide interest rate
					IND COM OTH PTY SCC			Check if Loan
					IND COM OTH PTY SCC			Check if Loan "Reprovide interest rate"
Reason for Amend	Iment:					*Contributor Codes IND - Individual COM - Recipient Co OTH - Other (e.g., PTY - Political Part) SCC Small Contrib	business ent	