

# 497 Contribution Report

Amounts may be rounded to whole dollars.

CITY OF BELL GARDENS  
 CITY CLERK'S OFFICE

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Christian Mendez for City Council 2020		<b>Date of This Filing</b> 11/03/2020	<b>Date Stamp</b> 2020 NOV -4 AM 8:00	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (# applicable)</b> 1430204	<b>Report No.</b> 11022020	<b>7100 GARFIELD AVE</b> <b>BELL GARDENS, CA 90201</b>	
<b>STREET ADDRESS</b> [REDACTED]		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Inglewood	<b>STATE</b> CA	<b>ZIP CODE</b> 90301	<b>No. of Pages</b> 1	

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
11/02/2020	Jennifer Rodriguez for City Council 2020 [REDACTED] Long Beach, CA 90802 Committee ID # 1422572  NON MONETARY CONTRIBUTION Mailer	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,626.87  <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

**\*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

Reason for Amendment: \_\_\_\_\_