

**497 Contribution Report**

Amounts may be rounded to whole dollars.

0218-4-LC01

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497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Re-Elect Ntuk for LBCCD Trustee 2022			<b>Date of This Filing</b> 08/22/2022	RECEIVED BY 8/22/22 2022 AUG 23 AM 9:04 CAMPAIGN FINANCE CALIFORNIA FORM 497 For Official Use Only 018749 C11600
<b>AREA CODE/PHONE NUMBER</b> (213) 489-4792	<b>I.D. NUMBER (if applicable)</b> 1442902		<b>Report No.</b> 082222-1	
<b>STREET ADDRESS</b>			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)	
<b>CITY</b> Norwalk	<b>STATE</b> CA	<b>ZIP CODE</b> 90650	<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
08/22/2022	Athens Services City Of Industry, CA 91746	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00  <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

\*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: \_\_\_\_\_