497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

CALIFORNIA FORM **497**

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NAME OF FILER					Date of This Filing __03/02/2021__
Somilleda for College Board 2021					

AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*	Report No. 9
(626)230-9220	1435232	

STREET ADDRESS			☐ Amendment to Report No. ___
			(explain below)

CITY	STATE	ZIP CODE	No. of Pages ___1___
Covina	CA	91722	

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
03/01/2021	Laborers' Local 300 Los Angeles, CA 90006 Committee ID # 950674	☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC		1,500.00 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ 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

FPPC Form 497 (Feb/2019)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

To: RRCC CFD
Subject: RE: Somilleda 497

From: Yolanda Miranda <yolimiranda@hotmail.com>
Sent: Tuesday, March 2, 2021 9:43 AM
To: RRCC CFD <cfd@rrcc.lacounty.gov>
Subject: Somilleda 497

CAUTION: External Email. Proceed Responsibly.

Laborers 300 -
Please find attached 497...thank you!

Yolanda Miranda

Yolanda Miranda and Assoc, Inc.

Covina, CA 91722
Office: 626-915-7635 Fax: 626-915-6626 Cell: 626-488-9191
PAYPAL

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