

497 Contribution Report

Amounts may be rounded to whole dollars.

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NAME OF FILER Cerritos Republican Club		Date of This Filing 4/22/22	Date Stamp RECEIVED BY LOS ANGELES COUNTY 2022 APR 22 PM 2:56 CAMPAIGN FINANCE (4)	CALIFORNIA FORM 497 For Official Use Only 605361
AREA CODE/PHONE NUMBER 562-743-1855	I.D. NUMBER (if applicable) 942154	Report No. 1		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below) No. of Pages 1		
CITY Cerritos	STATE CA	ZIP CODE 90703		

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
4/11/22	Yoo For Assembly 2022 Santa Ana, CA 92704 FPPC # 1446114 Reimbursement for filing fee	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1197.02 <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