497 Contribution Report				Amounts may be rounded to whole dollars.			RECEIVED BY 497 CONTRIBUTION REPORT			
NAME OF FILER NUNEZ FOR SCHOOL BOARD 2024				Date of This Filing	08/14/2024	emai 2024 AUG	ate Stamp	CALIFO	491;	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) (213) 489-4792			Report No. 1			GN FINANCE	'0''	Official Use Only		
STREET ADDRESS				to Report No.	The Amendment to Report No					
CITY		STATE CA	ZIP CODE 90650	No. of Pages	1					
1. Contributi	on(s) Received									
DATE RECEIVED	FULL NAM	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIE (IF COMMITTEE, ALSO ENTER LD. NUMBER)			CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)			AMOUNT RECEIVED	
08/13/2024	John Nunez Rosemead, CA 91770				IND COM OTH PTY SCC	Retired None			2,000.00 Check if Loan ** Provide interest rate	
08/13/2024	John Nunez Rosemead, CA 91770				IND COM OTH PTY SCC	Retired None			1,500.00 Check if Loan ** Provide interest rate	
08/13/2024	Rosemead, CA 91770 IN KIND-Campaign Strategy	y,Voter Targeting & Cop	ywriting		IND COM OTH PTY SCC	Retired None	•		1,000.00 Check if Loan ** Provide interest rate	
Reason for Amer	ndment:					II C	Contributor Codes ND – Individual COM – Recipient Con TH – Other (e.g., bi TY – Political Party CC – Small Contribu	usiness enti		