

# 497 Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

6124

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> SALAZAR FOR HLPUSD BOARD 2024		<b>Date of This Filing</b> 9/16/24	RECEIVED BY ANGELES COUNTY 2024 SEP 16 AM 11:56 CAMPAIGN FINANCE	CALIFORNIA FORM <b>497</b> For Official Use Only 020760 C12051
<b>AREA CODE/PHONE NUMBER</b> 909-583-4200	<b>I.D. NUMBER (if applicable)</b> 1471158	<b>Report No.</b> 2		
<b>STREET ADDRESS</b> _____		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> HACIENDA HEIGHTS	<b>STATE</b> CA	<b>ZIP CODE</b> 91745	<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
9/14/24	HACIENDA LA PUENTE TEACHERS ASSOCIATION PAC #1279127 CITY OF INDUSTRY, CA 91748	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2500.00 <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

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

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