

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

|   |   |                             |  |  |   |
|---|---|-----------------------------|--|--|---|
| <b>NAME OF FILER</b><br>DAVID VELA FOR COLLEGE BOARD 2024 |   |                             | <b>Date of This Filing</b> <u>10/11/2024</u>                                     | Date Stamp<br><br><div style="border: 2px solid red; padding: 5px; color: red; font-weight: bold;">                     E-Filed<br/>                     10/11/2024<br/>                     22:38:55<br/><br/>                     Filing ID:<br/>                     212296903                 </div> | <div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 24px;">                     CALIFORNIA FORM 497                 </div> For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br>(213) 489-4792           | <b>I.D. NUMBER (if applicable)</b><br>1382652 | <b>Report No.</b> <u>12</u> |  |  |   |
| <b>STREET ADDRESS</b><br>_____                            |   |                             | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |  |   |
| <b>CITY</b><br>Norwalk                                    | <b>STATE</b><br>CA                            | <b>ZIP CODE</b><br>90650    | <b>No. of Pages</b> <u>1</u>   |  |   |

## 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br><small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>  | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br><small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED   |
|---------------|---|---|--|---|
| 10/08/2024    | Coalition for LACC Reform to Supp VELA, IINO, HENDERSON, AND HOFFMAN<br>For Los Angeles CC Spnrd by LA College Faculty Guild Loc<br>Los Angeles, CA 90017<br>Committee ID # 1315215<br><br>IN-KIND - VOTER DATA | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | 675.76<br><br><input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate               |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br>_____%<br>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: \_\_\_\_\_