

6E24

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Saldana for School Board 2024			Date of This Filing 09/16/2024	RECEIVED BY LOS ANGELES COUNTY 2024 SEP 16 PM 2:54 CAMPAIGN FINANCE	CALIFORNIA FORM 497 For Official Use Only 019630 C12052
AREA CODE/PHONE NUMBER (562) 561-8162	I.D. NUMBER (if applicable)		Report No. 1		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY El Monte	STATE CA	ZIP CODE 91732	No. of Pages 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
09/05/2024	Mountain View Teachers Assoc. PAC Montebello, CA 90604 Committee ID # 891814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		560.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/05/2024	Mountain View Teachers Assoc. PAC Montebello, CA 90604 Committee ID # 891814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/16/2024	Mountain View Teachers Assoc. PAC Montebello, CA 90604 Committee ID # 891814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00 <input type="checkbox"/> Check if Loan _____% 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: _____