497 Contribution Report

Amounts may be rounded to whole dollars.

							49700	ONTRIBUTION REPORT
NAME OF FILER Yes on Measure AS for Arcadia Schools				Date of		Date Stamp	CALIFORNIA 497 FORM For Official Use Only	
				This Filing _	09/28/2024			
AREA CODE/PHONE NUMBER (626)244-7891		I.D. NUMBER (if applicable) 1474513		Report No. 20240928		E-Filed 09/28/2024 13:41:58		
STREET ADDRESS				☐ Amendment to Report No		Filing ID: 212205545		
CITY	TY STATE ZIP CODE		(explain below)					
Arcadia		CA	91006	No. of Pages	1			
1. Contribut	ion(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
09/28/2024	Harik Construction Glendora, CA 9174				☐ IND ☐ COM ※ OTH			2,000.00
					☐ PTY ☐ SCC			% Provide interest rate
09/28/2024	J.M. King Consulti Sacramento, CA 95				☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC			2,500.00 Check if Loan % Provide interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan When the second in the second
Reason for Ame	ndment:					*Contributor Codes IND – Individual COM – Recipient Co OTH – Other (e.g., b PTY – Political Party SCC – Small Contribution	ousiness ent	ity)

FPPC Form 497 (Feb/2019) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov