

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Clifford for Glendora Unified School District 2022		Date of This Filing 10/18/2022 11:11	RECEIVED BY LOS ANGELES COUNTY Date Stamp 2022 OCT 18 PM 1:52	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER 951-742-7886	I.D. NUMBER (if applicable) 1449045	Report No. 202		For Official Use Only
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY Riverside, CA 92501	STATE	ZIP CODE	CAMPAIGN FINANCE DISCLOSURE SECTION No. of Pages 2	

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
2022-10-17	Michael Lizarraga Glendora, CA 91741	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Telacu	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide Interest Rate

Reason for Amendment: _____

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* 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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STREET ADDRESS _____				
CITY Riverside, CA 92501	STATE ZIP CODE			

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment: _____