

# 497 Contribution Report

Amounts may be rounded to whole dollars.

① 10/26/22

NAME OF FILER <b>Giovanni Christon-Pope</b>		Date of This Filing <b>10/26/20022</b>	Date Stamp <b>2022 OCT 28 PM 2:40</b>	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER <b>6613417899</b>	I.D. NUMBER (if applicable) <b>ID #: #1451731</b>	Report No. _____	RECEIVED BY <b>LOS ANGELES COUNTY</b>	
STREET ADDRESS _____		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	CAMPAIGN FINANCE	
CITY <b>Lancaster</b>	STATE <b>CA</b>	ZIP CODE <b>93536</b>	No. of Pages <b>1</b>	

## 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
10/26/2022	AVC Federation of Teachers Committee on Political Education #1287157	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<b>1,000.00</b> <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

\* 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: Campaign for Giovanni Christon-Pope  
Anetlope Valley College Board 2022ID #: #14517