

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <b>CORONA FOR HIGH SCHOOL BOARD 2022</b>		Date of This Filing <b>09/26/2022</b>	Date Stamp <b>RECEIVED BY</b> <b>LOS ANGELES COUNTY</b>  <b>2022 OCT 18 PM 1:51</b>  <b>CAMPAIGN FINANCE</b> <b>DISCLOSURE SECTION</b>	<b>CALIFORNIA FORM 497</b>  For Official Use Only
AREA CODE/PHONE NUMBER <b>323-459-2185</b>	I.D. NUMBER (if applicable) <b>1449625</b>	Report No. <b>CC002-1</b>		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <b>Palmdale</b>	STATE <b>CA</b>	ZIP CODE <b>93550</b>	No. of Pages <b>1/2</b>	

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
09/26/2022	Marvin Crist For City Council 2022, ID# 1396979  Lancaster, CA 93534	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00  <input type="checkbox"/> Check if Loan  _____% <small>Provide interest rate</small>
09/26/2022	R Rex Parris, Carrol J Parris  Lancaster, CA 93534	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lawyers,  R Rex Parris Law Firm	2,000.00  <input type="checkbox"/> Check if Loan  _____% <small>Provide interest rate</small>
		<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  _____% <small>Provide interest rate</small>

\* 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: \_\_\_\_\_

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LOS ANGELES COUNTY  
Date Stamp

NAME OF FILER CORONA FOR HIGH SCHOOL BOARD 2022		Date of This Filing 09/26/2022	RECEIVED BY LOS ANGELES COUNTY Date Stamp 2022 OCT 18 PM 1: CAMPAIGN FINANCE DISCLOSURE SECTION CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 323-459-2185	I.D. NUMBER (if applicable)	Report No. CC002-2	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Palmdale	STATE CA	ZIP CODE 93550	
		No. of Pages 2/2	

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
09/21/22	Budget WATCHDOGS, ID# 1345115 Torrance, CA 90505	Slate	1,012.00	

Reason for Amendment: \_\_\_\_\_