

497 Contribution Report

Amounts may be rounded to whole dollars.

0218

NAME OF FILER BUELNA FOR COLLEGE BOARD 2022			Date of This Filing <u>09/21/2022</u>	RECEIVED BY LES U 2022 SEP 21 PM CAMPAIGN FINANCE CALIFORNIA FORM 497 For Official Use Only 015577
AREA CODE/PHONE NUMBER (213) 489-4792	I.D. NUMBER (if applicable) 1392470		Report No. <u>092122-1</u>	
STREET ADDRESS _____			<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Norwalk	STATE CA	ZIP CODE 90650	No. of Pages <u>1</u>	

1. Contribution(s) Received

C10731

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
09/21/2022	Service Employees International Union, Local 721, CTW State & Local Los Angeles, CA 90017 Committee ID # 743794	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		2,000.00 <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

Reason for Amendment: _____

*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

