## 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER  EDDYFUNN IKEMFUNA FOR CITY COUNCIL 2022		Date of This Filing 10/24/2022		Date Stamp CALIFORNIA FORM 497	
AREA CODE/PHONE N STREET ADDRESS CITY Carson	Y STATE ZIP CODE		nt1	For Official Use Only  RECEIVED  2022 OCT 25 A 8: 14  CITY CLERK DEPARTMENT	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU	JTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/24/2022	Patrick Okpuzor  Springfield Gardens, NY 11413		IND COM OTH PTY SCC	Retired None	1,000.00  Check if Loan  % Provide interest rate
			☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan  % Provide interest rate
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan  % Provide interest rate
Reason for Amen	dment:			*Contributor Codes IND – Individual COM – Recipient Committee (oth OTH – Other (e.g., business en PTY – Political Party SCC – Small Contributor Commit	tity)