

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Vargas for Mayor 2024		<b>Date of This Filing</b> 10/18/2024	<b>Date Stamp</b>	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1375353	<b>Report No.</b> 24-8  <input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		RECEIVED  2024 OCT 21 A 8:22  CITY CLERK DEPARTMENT
<b>STREET ADDRESS</b> [REDACTED]				
<b>CITY</b> Hawthorne	<b>STATE</b> CA	<b>ZIP CODE</b> 90250	<b>No. of Pages</b> 1	

## 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
10/18/2024	Alez Padilla for City Council 2026 [REDACTED] Inglewood, CA 90301 Committee ID # 1349062	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/18/2024	Laborers International Union of North America Local 1309 [REDACTED] Lakewood, CA 90712	<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 _____% 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: \_\_\_\_\_