

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <b>FRODO SORNOSO</b>		Date of This Filing <b>1/14/20</b>	Date Stamp	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER <b>626 826-0949</b>	I.D. NUMBER (if applicable)	Report No. <b>1</b>		
STREET ADDRESS <b>793 W. GLEASON ST.</b>		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY <b>MONTEREY PARK</b>	STATE <b>CA</b>	ZIP CODE <b>91754</b>	No. of Pages	

CITY CLERK OFFICE  
2020 JAN 14 P 1:32  
CITY OF MONTEREY PARK

## 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
<b>1/8/20</b>	<b>CAMINO REAL 2401 S. ATLANTIC BLVD. MONTEREY PARK, CA. 91754</b>	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" 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: \_\_\_\_\_