

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Jennifer Tang for City Council 2020 District 2		Date of This Filing <u>2/13/2020</u>	Date Stamp 2020 FEB 14 A 7 35	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 626-808-5761	I.D. NUMBER (if applicable) #1419895	Report No. <u>4</u> CITY CLERK OFFICE		
STREET ADDRESS P.O. Box 1045		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Monterey Park	STATE CA	ZIP CODE 91754	No. of Pages <u>1</u> 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
2/13/2020	Painters and Allied Trades District Council No. 36 Political Action Committee FPPC #743641 777 S. Figueroa Street Suite 4050 Los Angeles, CA 90017	<input type="checkbox"/> IND. <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2500 <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