

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES COUNTY
Date Started
2022 MAY -3 PM 4:42
PROPOSITION D UNIT
EM

497 CONTRIBUTION REPORT

NAME OF FILER Solis for Supervisor 2022		Date of This Filing 05/03/2022	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1436739	Report No. 05/02/2022	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Encino	STATE CA	ZIP CODE 91436	
		No. of Pages 3	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
05/02/2022	Paul Viviano Huntington Beach, CA 92648	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President and CEO Children's Hospital Los Angeles	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/02/2022	Hollywood American Chines Global Film Company Arcadia, CA 91007	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/02/2022	Fang, David S W A Professional Law Corp. City Of Industry, CA 91748	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <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: _____

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY

497 CONTRIBUTION REPORT

NAME OF FILER Solis for Supervisor 2022		Date of This Filing 05/03/2022	RECEIVED BY 2022 MAY -3 PM 4:42 PROPOSITION 8 UNIT	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1436739	Report No. 05/02/2022		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Encino	STATE CA	ZIP CODE 91436		
			No. of Pages 3	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
05/02/2022	LAMS Usa Group LLC San Marino, CA 91108	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/02/2022	Polly Low For Rosemead Rosemead, CA 91770 Committee ID # 1273880	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/02/2022	Yong Zhang Walnut, CA 91789	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager New World International	1,500.00 <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: _____

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Solis for Supervisor 2022			Date of This Filing 05/03/2022	RECEIVED BY 2022 MAY -3 PM 4:42 PROPOSITION 8 UNIT	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1436739		Report No. 05/02/2022		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Encino	STATE CA	ZIP CODE 91436	No. of Pages 3		

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
05/02/2022	Eileen Wang Arcadia, CA 91004	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President American Southwest Chamber of Commerce ISA	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/02/2022	Zee Law Group El Monte, CA 91731	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/02/2022	Robert W. Brown Inglewood, CA 90302	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO University of West Los Angeles	1,500.00 <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: _____