497 Contribu	ution Report	100	Amounts	may be rounded to w	hole dollars.	RECEIVED BY	.≉ 497 C	ONTRIBUTION REPORT
NAME OF FILER				Date of		Date Stamp	CALIFO	
Hilda Solis for Supervisor 2022				This Filing _	04/08/2022 20	2 APR 11 AM 8: 16	FOR	
AREA CODE/PHONE NUMBER (I, D, NUMBER (if applicable)  143.673.9				Report No. 1		POSITION B UNIT	For	Official Use Only
STREET ADDRESS				Amendment to Report No.		En 4/8/2022		
CITY Encino	STATE ZIPCODE  CA 91436			(explain below) No. of Pages	1			
1. Contributi	on(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIE (IFCOMMITTEE, ALSO ENTER LD. NUMBER)			BUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
04/07/2022	Los Angeles Footbal				☐ IND☐ COM☐ OTH☐ PTY☐ SCC		2	1,500.00  Check if Loan  **  Provide interest rate
04/07/2022	Walter Yoka Los Angeles, CA 900	071			IND COM OTH SCC	Attorney Yoka Smith LLP		1,000.00  Check if Loan  Provide Interest rate
			d sa	3	IND   COM   OTH   PTY   SCC			Check if Loan
Reason for Amen	idment:					*Contributor Codes INDIndividual COM Recipient Co OTH Other (e.g., I PTY Political Party	business en	