

# 497 Contribution Report

Amounts may be rounded to whole dollars.

SEP 28 2020 10:05

NAME OF FILER <b>Maravilla for Council 2020</b>		Date of This Filing <b>9/28/2020</b>	Date Stamp	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER <b>(562) 338-3665</b>	I.D. NUMBER (if applicable) <b>1415337</b>	Report No. <b>2</b>		
STREET ADDRESS <b>22123 Clarkdale Avenue</b>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <b>Hawaiian Gardens</b>	STATE <b>CA</b>	ZIP CODE <b>90716</b>	No. of Pages <b>4</b>	

## 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
9/25/2020	Infrastructure Architects, Inc. 222 S Harbor Blvd #705 Anaheim, CA 92805-3700	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/25/2020	Vache & Kostina Hanessian 23 Corporate Plaza, Ste 247 Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	KMS Properties, Inc/CFO	\$1,000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/25/2020	Top Notch Commercial Truck Wash Inc. 136 S 6th St Montebello, CA 90640	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000 <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)  
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## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
9/25/20	<b>Del Rio for Council 2020 FPPC #1425690 22008 Devlin Avenue, Hawaiian Gardens, CA 90716</b>	<b>Maria Teresa Del Rio Hawaiian Gardens City Council</b>	\$767.68 \$333.34 \$219.73	11/3/2020
9/25/2020	<b>Farfan for City Council 2020 FPPC #1427192 12319 213th Street, Hawaiian Gardens, CA 90716</b>	<b>Victor Farfan Hawaiian Gardens City Council</b>	\$767.68 \$333.34 \$219.73	11/3/2020

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CITY Hawaiian Gardens	STATE CA	ZIP CODE 90716	No. of Pages 4		

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9/22/2020	Farfan for City Council 2020 FPPC #1427192 12319 213th Street Hawaiian Gardens, CA 90716	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,179.35  <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/25/2020	Lucien Partners 2319 67th Avenue Sacramento, CA 95822	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000  <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

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9/25/2020	Paul A Wolfe & Lisa Shirvanian-Wolfe 1 Sea Shell Newport Coast, CA 92657-1705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Komar Investment/Manager	\$1,000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/25/2020	Maria Cholakian 906 Kilmory Ln Glendale, CA 91207-1106	<input checked="" type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Healthy Medications, LLC/Officer	\$1,000 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/25/2020	Tommy A Gendal 400 Pioneer Dr Glendale, CA 91203-1713	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Waste Resources/Executive	\$1,000 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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