496 Independent Expenditure I	Report		Amounts n	nay be rounded to whole dollars.				
NAME OF FILER Californians for Better Education and Jobs				Date of 10/30/2020 This Filing	Date Stamp	CALIFO		<b>496</b>
AREA CODE/PHONE NUMBER	I.D. NUME	BER (if applicable)	)	3		127 127 177		Only
(323) 884-6758	142541	2		Report No.		For Official Use Only		
STREET ADDRESS				- Average and	3 5			
1306 S. Atlantic Drive Apt.6				Amendment to Report No.				
CITY	STATE	ZIP CODE		(explain below)				
Compton		90221		No. of Pages				
1. List Only One Candidate or Ballot Me	easure							
NAME OF CANDIDATE SUPPORTED OR OPPOSED  Myra Maravilla				NAME OF BALLOT MEASUR	RE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION		SUPPORT	OPPOSE
City Council Member: Hawaiian Gardens	N/A		x					
2. Independent Expenditures Made Attac	ch additional inforn	nation on appr	opriately lab	eled continuation sheets.				
DATE		DE	SCRIPTION (	DF EXPENDITURE		AMOUNT		
10/30/2020 Mailer Cumulative to da	Mailer Cumulative to date total 2,454.09							
					<u> Here</u>			
Reason for Amendment								

496 Independe	nt Expenditure R	eport		Amounts n	nay be rounded to whole dollars	<b>3.</b>				
NAME OF FILER  Californians for Better					Date of 10/30/2020 Date Stamp		CALIFORNIA 496			
AREA CODE/PHONE NUMB	ER	I.D. NUME	BER (if applicable)		3	For Official Use Only				
(323) 884-6758					Report No.	i di Sindiai Ode Siny				
STREET ADDRESS					Amendment					
1306 S. Atlantic Drive	Apt.6				to Report No					
CITY		STATE	ZIP CODE		(explain below)					
Compton CA 90221				No. of Pages						
1. List Only One C	andidate or Ballot Mea	asure								
NAME OF CANDIDATE  Victor Farfan	SUPPORTED OR OPPOSED				NAME OF BALLOT MEAS	SURE SUPPORTED OR OPPOSED				
OFFICE SOUGHT OR H	HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SU	PPORT	OPPOSE	
City Council Mem	iber: Hawaiian Gardens	N/A		x						
2. Independent Ex	penditures Made Attach	additional inform	nation on appn	opriately lab	eled continuation sheets.					
DATE			DE	SCRIPTION (	OF EXPENDITURE		A	AMOUNT		
10/30/2020	Mailer Cumulative to date	e total 2,454.09					818.03			
		20.00								
					7 7					

NAME OF FILER Californians for Better Education and Jobs					Date of 10/230/2020 This Filing	Date Stamp	CALIFORNIA 496		
AREA CODE/PHONE NUMBER (if applicable)					3		For Official Use Only		
(323) 884-6758		142541	2		Report No.				
STREETADDRESS					Amendment				
1306 S. Atlantic Drive A	pt.6				to Report No				
CITY		STATE	ZIP CODE		(explain below)				
Compton	ompton CA 90221			No. of Pages					
1. List Only One Ca	ndidate or Ballot Mea	asure							
NAME OF CANDIDATE S	UPPORTED OR OPPOSED				NAME OF BALLOT MEASUR	E SUPPORTED OR OPPOSED			
Maria Teresa Del R	io				1 1				
OFFICE SOUGHT OR HE	LD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT OPPOSE		
City Council Memb	er: Hawaiian Gardens	N/A		x					
2. Independent Exp	enditures Made Attach	additional inform	nation on appr	opriately lab	eled continuation sheets.				
DATE			DE	SCRIPTION (	DF EXPENDITURE		AMOUNT		
10/30/2020	Mailer Cumulative to date	e total 2,454.09			- 71		818.03		
						13.35			