

LC10
0218-4

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES COUNTY

NAME OF FILER I Copy Inc. dba IBE Digital		Date of This Filing 10/31/2022	2022 OCT 31 PM 4:13 Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (562) 921-0202	I.D. NUMBER (if applicable)	Report No. 10	CAMPAIGN FINANCE 10/31/22 EMAIL	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Garden Grove	STATE CA	ZIP CODE 92841	No. of Pages 1	

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)
10/07/2022	Tomas Ivens for School Board 2022 ID#1451735	Tomas Ivens, Bellflower Unified School District	\$2,000.00	11/8/2022

Reason for Amendment: _____