

497 Contribution Report

Amounts may be rounded to whole dollars.

0137

RECEIVED BY
LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

Date Stamp
2021 JUN 22 PM 3:30

CALIFORNIA FORM 497
For Official Use Only

CAMPAIGN FINANCE

021036

NAME OF FILER
Brasov for NLMUSD School Board 2021

AREA CODE/PHONE NUMBER (562) 983-0815

I.D. NUMBER (if applicable) 1437825

STREET ADDRESS

CITY Long Beach **STATE** CA **ZIP CODE** 90802

Date of This Filing 06/22/2021

Report No. 06-22-NB

Amendment to Report No. (explain below)

No. of Pages 1

1. Contribution(s) Received

C11565

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
06/21/2021	Narcis Brasov La Mirada, CA 90638 LOAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Narcis Brasov	3,000.00 <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
		<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

Reason for Amendment: _____

*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