497 Contrib	ution Report	Amoun	ts may be rounded to	whole dollars.	RECEIVED BY 4970	ONTRIBUTION REPORT
NAME OF FILER Solis for Supe	ervisor 2022		Date of This Filing06/02/2022		2032 Hill 2 PM Loc FORM 497	
AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable)  1436739			Report No. 06/01/2022		2022 JUN -2 PM 4: 0 FORM  For Official Use Only  PROPOSITION B UNIT	
STREET ADDRESS		1230000	Amendment to Report No.		THOI CONTION B ON	
CITY Encino	STATE ZIP CODE  CA 91436		(explain below)  No. of Page	s1		
1. Contribut	ion(s) Received					
DATE RECEIVED	FULL NAM	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	
06/01/2022	Phil Jiang Rolling Hills Estates, CA 90274			IND COM OTH PTY SCC	Founder and CEO Rainbow US Inc	1,500.00
06/01/2022	Christopher Chonq Monterey Park, CA 91754			IND COM OTH PTY SCC	Assistant La Puente Optometry Center	1,500.00
06/01/2022	Maximus Inc Reston, VA 20190			☐ IND		1,500.00
				COM SOTH PTY SCC		Check if Loan  ———————————————————————————————————
Reason for Ame	ndment:				*Contributor Codes IND – Individual COM – Recipient Committee (ot OTH – Other (e.g., business en PTY – Political Party SCC – Small Contributor Commit	tity)