497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER						THE OTHER PORT
HANS LIANG FOR CITY COUNCIL 2013			Date of This Filing	02/13/13	Date Stamp CALIFO	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1353529 STREET ADDRESS		Report No		COTY CLERK OF FICE or Official Use Only		
CITY STATE ZIP CODE		(explain below) No. of Pages	1	CITYOF MONTEREY PARK		
1. Contributio	n(s) Received					
DATE RECEIVED	FULL NAM	IE, STREET ADDRESS AND ZIP CODE OF CONTRIE (IF COMMITTEE, ALSO ENTER I.D., NUMBER)	BUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/13/13	HANS LIANG			☐ COM ☐ OTH ☐ PTY ☐ SCC	DEPUTY PROBATION OFFICER LA COUNTY PROBATION DEPT.	10000 ☑ Check if Loan 0 Provide interest rate
				☐ IND☐ COM☐ OTH☐ PTY☐ SCC		☐ Check if Loan
				IND COM OTH PTY SCC		☐ Check if Loan ————————————————————————————————————
Reason for Amendr	ment:				**Contributor Codes IND – Individual COM – Recipient Committee (oth OTH – Other (e.g., business enti PTY – Political Party SCC – Small Contributor Commi	ty)

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)