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497 CONTRIBUTION REPORT

NAME OF FILER		Date of	8/1/2024		IFORNIA 497		
Steven Hernandez for Mayor 2024		This Filing	0/1/2024	F	ORM 491		
AREA CODE/PHONE NUM	MBER I.D. NUMBER (if applicable)	Report No)	l l	For Official Use Only		
STREET ADDRESS CITY Coachella	STATE ZIP CODE CA 92236	Amendmer to Report No. (explain below) No. of Pages	5		RECEIVED AUG 0 1 2024		
1. Contribution(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU' (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINES:			
7/31/2024	Alan Pace		☐ IND☐ COM☐ OTH☐ PTY SCC		100 Check if Loan ** Provide interest rate		
7/31/2024	R.A Foulds, Inc		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		50 Check if Loan ———————————————————————————————————		
7/31/2024			☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan Provide interest rate		
Reason for Amendm	nent:			**Contributor Codes IND - Individual COM - Recipient Committee OTH - Other (e.g., business PTY - Political Party SCC - Small Contributor Cor	entity)		

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497 CONTRIBUTION REPORT

NAME OF FILER Steven Hernandez for Mayor 2024		Date of This Filing	8/1/2024	Date Stamp CALIFORNIA FORM	
AREA CODE/PHONE NU		Report No.	1		For Official Use Only
CITY Coachella	STATE ZIP CODE CA 92236	Amendmer to Report No. (explain below) No. of Pages	5		
1. Contributio	n(s) Received				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	ΓOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMP (IF SELF-EMPLOYED, ENTER NAME OF I	PLOYER AMOUNT RECEIVED
7/31/2024	Boss 429 Properties Inc		☐ IND☐ COM☐ OTH☐ PTY SCC		250 Check if Loan Provide interest rate
7/31/2024	PROPCORP, INC.		X IND COM OTH PTY SCC		250 Check if Loan ** Provide interest rate
7/31/2024	Blaine Carian & Susan Kitagawa		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		150 ☐ Check if Loan ————————————————————————————————————
Reason for Amendr	nent:			**Contributor Codes IND - Individual COM Recipient Com OTH Other (e.g., bu PTY Political Party SCC Small Contribu	

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497 CONTRIBUTION REPORT

NAME OF FILER Steven Hernandez for Mayor 2024				CALIFORNIA FORM	497				
AREA CODE/PHONE NUM	MBER 1.D. NUMBER (if applicable) Perdere	Report No	1		For Official Use	Only			
STREET ADDRESS	STATE ZIP CODE	Amendment to Report No (explain below)							
Coachella	CA 92236	No. of Pages5							
1. Contribution(s) Received									
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMF (IF SELF-EMPLOYED, ENTER NAME OF E	LUIER DEC	DUNT			
7/31/2024	Douglas C Jones		IND COM OTH PTY SCC	_	1,000 ☐ Check	if Loan			
7/31/2024	Jasone Hernandez		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		500 ☐ Check	(if Loan%			
7/31/2024	Burke Rix Communications, LLC		☐ IND☐ COM☐ OTH☐ PTY SCC		250 ☐ Check	k if Loan % Interest rate			
Reason for Amendm	nent:			**Contributor Codes IND - Individual COM - Recipient Com OTH - Other (e.g., but PTY - Political Party SCC - Small Contribu	siness entity)	or SCC)			

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

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497 CONTRIBUTION REPORT

NAME OF FILER Steven Hernandez for Mayor 2024		Date of This Filing	8/1/2024	Date Stamp CALIFORNIA 49		
AREA CODE/PHONE NU	MBER (if applicable) Pendine	Report No	1		For Official Use Only	
STREET ADDRESS CITY Coachella	STATE ZIP CODE CA 92236	Amendment to Report No (explain below) No. of Pages _				
1. Contribution						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	ITOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYI (IF SELF-EMPLOYED, ENTER NAME OF BUSINE		
7/31/2024	Coronet Concrete Products Inc DBA: Desert Redi-Mix		☐ IND ☐ COM ☐ OTH ☐ PTY ▼ SCC		1,999.99 Check if Loan Provide interest rate	
7/31/2024	Matthew J Richert 12/21		☐ IND☐ COM☐ OTH☐ PTY SCC		1,999.99 Check if Loan Provide interest rate	
7/31/2024	Administrative Services Cooperative, INC		☐ IND☐ COM☐ OTH☐ PTY SCC		1,500 Check if Loan ** Provide interest rate	
Reason for Amendo	nent:			**Contributor Codes IND – Individual COM – Recipient Committe OTH – Other (e.g., busines PTY – Political Party SCC – Small Contributor C	ss entity)	

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

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497 CONTRIBUTION REPORT

Steven Hernande AREA CODE/PHONE NU STREET ADDRESS CITY Coachella 1. Contribution	STATE ZIP CODE CA 92236	Date of This Filing Report No. Amendmento Report No. (explain below) No. of Pages	8/1/2024 t	F	IFORNIA 497 FORM 497
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUT	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINES:	AMOUNT RECEIVED
7/31/2024	Kyle Washington		IND COM OTH PTY SCC		5,500 Check if Loan Provide interest rate
7/31/2024	Zanzibar Ranch LLC		☐ IND☐ COM☐ OTH☐ PTY SCC		5,000 Check if Loan Provide interest rate
7/31/2024	MB 26 LLC		☐ IND☐ COM☐ OTH☐ PTY SCC		5,000 Check if Loan ** Provide interest rate
Reason for Amenda	nent:			**Contributor Codes IND - Individual COM - Recipient Committee OTH - Other (e.g., business PTY - Political Party SCC - Small Contributor Cor	entity)