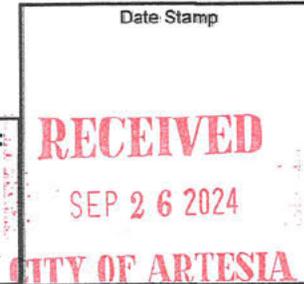


Recipient Committee Campaign Statement Cover Page



Statement covers period
from 9/12/24
through 9/26/24

Date of election if applicable:
(Month, Day, Year)
11/05/2024

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall
(Also Complete Part 5)
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored
(Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1474839

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Ahir for Artesia City Council 2024; Zeel

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Artesia CA 90701

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Jignesh Ahir

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Artesia CA 90701

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 9/26/24
Date

Executed on 9/26/24
Date

Executed on _____
Date

Executed on _____
Date

By _____
Signature of Treasurer or Assistant Treasurer

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Zeel Ahir

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE):
Artesia City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
[REDACTED] Artesia CA 90701

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

| | |
|-------------------|---|
| COMMITTEE NAME | IID. NUMBER |
| NAME OF TREASURER | CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |
| CITY | STATE ZIP CODE AREA CODE/PHONE |

| | |
|-------------------|---|
| COMMITTEE NAME | IID. NUMBER |
| NAME OF TREASURER | CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |
| CITY | STATE ZIP CODE AREA CODE/PHONE |

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

| | | |
|----------------------|--------------|---|
| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
|----------------------|--------------|---|

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

| | |
|-----------------------|---------------------|
| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

| | | |
|-----------------------------------|-----------------------|---|
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |

Attach continuation sheets if necessary

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|----------------------------|
| Statement covers period from <u>9/11/24</u> through <u>9/26/24</u> | CALIFORNIA FORM 460 |
| | Page <u>3</u> of <u>10</u> |

| | |
|--|-------------------------------|
| NAME OF FILER <u>Ahir for Artesia City Council 2024; Zeel</u> | I.D. NUMBER <u>1474839</u> |
|--|-------------------------------|

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|---|-----------------------------|---|---------------------------------------|
| 9/17/24 | Hema Patel Sanjay Patel ██████████ Rushmore 011501 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Entrepreneur | \$250 | | |
| 9/17/24 | Bankim Patel Bhagvati Patel ██████████ Oranosa 02866 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$500 | | |
| 9/17/24 | SPK Hospitality LLC DBA Triplodge 17843 Sierra highway Santa Clarita 01351 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500 | | |
| 9/17/24 | Niranjan Dipak Corp DBA Glendora Motel 330 W Route 66 Glendora CA 01740 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500 | | |
| 9/17/24 | Hansa Patel ██████████ Los Angeles, 90027 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$500 | | |
| SUBTOTAL \$ 2250 | | | | | | |

*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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|----------------------------|
| Statement covers period from <u>9/11/24</u> through <u>9/26/24</u> | CALIFORNIA FORM 460 |
| | Page <u>4</u> of <u>10</u> |
| I.D. NUMBER 1474839 | |

NAME OF FILER

Ahir for Artesia City Council 2024; Zeel

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/17/24 | Girish Patel [REDACTED] Lakewood CA 90712 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self employed, Hospitality | \$500 | | |
| 9/11/24 | Paresh, Dipti, Nilesh, Jyotika Bhakta [REDACTED] Cerritos CA 90703 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$2000 | | |
| 9/17/24 | Mital S. Patel Sanmukh Patel [REDACTED] Venice CA | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$250 | | |
| 9/17/24 | Jagdish Kumar patel Panna Patel | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$250 | | |
| 9/17/24 | Shraddha LLC DBA Ruby Motel 1896 Pacific Ave Long Beach 90806 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500 | | |
| SUBTOTAL \$ 3500 | | | | | | |

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|----------------------------|
| Statement covers period from <u>9/11/24</u> through <u>9/26/24</u> | CALIFORNIA FORM 460 |
| Page <u>5</u> of <u>10</u> | ID. NUMBER 1474839 |

NAME OF FILER

Ahir for Artesia City Council 2024; Zeel

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/17/24 | Sumantrai Ahir [REDACTED] 10409 Stamps Rd Downey, CA 90241 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$2000 | | |
| 9/17/24 | Suresh Balsara Lataben Balsara [REDACTED] Norwalk, CA 90650 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Insurance | \$100 | | |
| 9/17/24 | Narendra Patel Niranjana Patel Timesh Patel [REDACTED] Southgate CA 90280 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$1000 | | |
| 9/17/24 | MP Insurance Manu Patel 11646 183rd st Artesia CA 90701 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$100 | | |
| 9/17/24 | Jayan Bhakta Purvi Bhakta Sushma Bhakta [REDACTED] Cerritos 90703 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pharmacist | \$151 | | |
| SUBTOTAL \$ 3351 | | | | | | |

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SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|----------------------------|
| Statement covers period from <u>9/11/24</u> through <u>9/26/24</u> | CALIFORNIA FORM 460 |
| | Page <u>6</u> of <u>10</u> |
| NAME OF FILER Ahir for Artesia City Council 2024; Zeel | |
| I.D. NUMBER 1474839 | |

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/17/24 | Sudeep, Anjana and Poonam Gorakshakar [REDACTED] Cerritos 90703 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | \$250 | | |
| 9/12/24 | Lata Ahir [REDACTED] Artesia CA 90701 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Realtor | \$500 | | |
| 9/17/24 | Parbhu Patel, Ashish Patel [REDACTED] Los Angeles 9003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$500 | | |
| 9/17/24 | Ajit Dudhekar [REDACTED] Artesia 90701 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Platinum West Funding | \$100 | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL \$ 1350 | | | | | | |

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 (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|----------------------------|
| Statement covers period from <u>9/11/24</u> through <u>9/26/24</u> | CALIFORNIA FORM 460 |
| | Page <u>7</u> of <u>10</u> |
| I.D. NUMBER 1474839 | |

NAME OF FILER

Ahir for Artesia City Council 2024; Zeel

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/17/24 | Kamlesh Patel Tanuja Patel [REDACTED] Cerritos 90703 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$1001 | | |
| 9/17/24 | Nayan Ahir Prabha Ahir [REDACTED] Tustin CA 92780 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$500 | | |
| 9/17/24 | Nitesh Patel [REDACTED] Orange, 92865 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$101 | | |
| 9/17/24 | Catalina Hospitality LLC 210 N Tustin St, Orange CA 92867 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$101 | | |
| 9/17/24 | SNA hotels LLC 13337 South st Cerritos 90703 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$500 | | |
| SUBTOTAL \$ 2203 | | | | | | |

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(other than PTY or SCC)
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PTY - Political Party
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|----------------------------|
| Statement covers period from <u>9/11/24</u> through <u>9/26/24</u> | CALIFORNIA FORM 460 |
| | Page <u>8</u> of <u>10</u> |

| | |
|--|-------------------------------|
| NAME OF FILER <u>Ahir for Artesia City Council 2024; Zeel</u> | I.D. NUMBER <u>1474839</u> |
|--|-------------------------------|

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/17/24 | Anil Mahajan Kusum Mahajan [REDACTED] Cerritos 90703 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-Employed, Mortgage | \$250 | | |
| 9/17/24 | Ashok Patnaik, Pratibha Patnaik [REDACTED] Cerritos CA 90703 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Banker | \$100 | | |
| 9/17/24 | CK ChildKare Inc. 12417 Creekwood Ave Cerritos CA 90703 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250 | | |
| 9/17/24 | Maruti Management LLC DBA La Mirage 11711 Western Ave Los Angeles 90047 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1000 | | |
| 9/17/24 | Lomita LLC DBA Leos Motel 1879 W Lomita Blvd, 90717 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250 | | |
| SUBTOTAL \$ 1850 | | | | | | |

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PTY – Political Party
SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|----------------------------|
| Statement covers period from <u>9/11/24</u> through <u>9/26/24</u> | CALIFORNIA FORM 460 |
| Page <u>9</u> of <u>10</u> | I.D. NUMBER 1474839 |

NAME OF FILER

Ahir for Artesia City Council 2024; Zeel

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/17/24 | Friends of Tony Lima 11748 187th St Artesia CA 90701 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$1000 | | |
| 9/17/24 | Dalsukhbhai Patel, Naina Patel [REDACTED] Cerritos 90703 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$1000 | | |
| 9/17/24 | Abhinav Ajay Mehta 11901 176th st Artesia CA 90701 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250 | | |
| 9/17/24 | Nitin Patel [REDACTED] Norwalk CA 90650 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$250 | | |
| 9/17/24 | Raju Patel Tara Patel [REDACTED] La Palma 90623 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self-employed, Hospitality | \$250 | | |
| SUBTOTAL \$ 2750 | | | | | | |

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(other than PTY or SCC)
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PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

| | |
|--|-----------------------------|
| Statement covers period from <u>9/11/24</u> through <u>9/26/24</u> | CALIFORNIA FORM 460 |
| | Page <u>10</u> of <u>10</u> |
| I.D. NUMBER 1474839 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ahir for Artesia City Council 2024; Zeel

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-------------------------|---|---|---|-----------------------------|---|---------------------------------------|
| 9/17/24 | Stallion Motel LLC 4415 S Arlington Ave Los Angeles, CA 90043 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250 | | |
| 9/17/24 | Midweek Motel 1901 W Garvey Ave Alhambra 91083 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$200 | | |
| 9/17/24 | Prash Corp 2800 E Colorado Blvd Pasadena, 91107 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$250 | | |
| 9/17/24 | Kajol Corporation Trust Fund 17726 Pioneer Blvd Artesia CA 90701 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1600 | | |
| 9/17/24 | KMK Import Inc 9070 Rosecrans Ave Bellflower, CA 90706 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1000 | | |
| SUBTOTAL \$ 3300 | | | | | | |

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 20,554
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 396
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 20,950

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