497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER	Date of This Filing	Date Stamp	CALIFORNIA FORM 497
Albert Padilla for Heber Elementary School District Board 2026	11/09/2026	Registrar of Voters NOV 09 2026 Imperial County	For Official Use Only
AREA CODE/PHONE NUMBER / I.D. NUMBER (if applicable)	Report No. 2		
[redacted]	☐ Amendment to Report No. _____ (explain below)		
STREET ADDRESS	No. of Pages 1		
[redacted]			
CITY / STATE / ZIP CODE			
[redacted]			

1. Contribution(s) Received

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
09/28/2026	Albert Padilla [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Brawley Union High School District	800.00 ☐ Check if Loan _____% Provide interest rate
10/20/2026	Albert Padilla [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Brawley Union High School District	470.74 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate

* 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

Reason for Amendment: _____