497 Contribi	ution Report Amounts n	may be rounded to wi	hole dollars.	DE RECEIVED BY 49	CONTRIBUTION REPORT
Holly J. Mitchell for County Supervisor 2020 AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) (916) 706-2677 1415889 STREET ADDRESS CITY STATE ZIP CODE		Date of This Filing Report No. 3/ Amendment to Report No. (explain below)	12/20/2019 3/20-5	2019 DEC 20 DEC	FORNIA 497 For Official Use Only
Sacramento	CA 95814	No. of Pages	1		
1. Contributi	on(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
12/20/2019	Austin Beutner Los Angeles, CA 90272		X IND COM OTH PTY SCC	Superintendent Los Angeles Unified School District	1,500.00 Check if Loan ** Provide interest rate
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan
			☐ IND☐ COM☐ OTH☐ PTY☐ SCC		☐ Check if Loan % Provide interest rate
Reason for Amen	dment:			*Contributor Codes IND – Individual COM – Recipient Committee (OTH – Other (e.g., business PTY – Political Party SCC – Small Contributor Com	entity)