

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER SURJ Action LA 2020		Date of This Filing 2/10/2020	Date Stamp RECEIVED BY LOS ANGELES CO 2020 FEB 10 PM 2:14 PROPOSITION B UNIT	CALIFORNIA FORM 496 For Official Use Only		
AREA CODE/PHONE NUMBER 845-706-3340	I.D. NUMBER (if applicable) 1418541	Report No. 2				
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)				
CITY Brooklyn	STATE NY	ZIP CODE 11201		No. of Pages _____		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
				Reform Jails and Community Reinvestment Initiative			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
2/10/2020	NEW CONVERSATION CONSULTING LLC PRO-Canvass Services	\$20,000

Reason for Amendment _____
