497 Contribu	ition Report	Amount	ts may be rounded to w	M	CEIVED BY		ONTRIBUTION REPORT
NAME OF FILER			Date of	LUS A	MGELES COUNTY	CALIFO	
Holly J. Mitch	ell for County Superv	isor 2020	This Filing _	02/28/2020 2020 M	AD IO DM L.OF	FOF	0
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)			Depart No. 3	/3/20-36	AR 10 PM 4:05	For	Official Use Only
(916) 706-2677 1415889			Report No. 27	PROPOSITION B UNIT			
STREET ADDRESS	*	16	☐ Amendme	ent	OULTION D OWLL		
			to Report No				
CITY	is .	STATE ZIP CODE	(explain below)		· · · · · · · · · · · · · · · · · · ·		
Sacramento		No. of Pages	3			,	
1. Contributi	on(s) Received						
DATE RECEIVED	FULL NAMI	TRIBUTOR	CONTRIBUTOR CODE *			AMOUNT RECEIVED	
02/28/2020	Cecilia Aguiar-Curr Sacramento, CA 958: Committee ID # 141:			IND I COM OTH PTY SCC			. 1,500.00 Check if Loan Provide interest rate
02/28/2020	David Chiu For Asse Oakland, CA 94612		IND □ COM □ OTH □ PTY		1,500.00 ☐ Check if Loan		
			1 - 1 - 1 × - 1 · 1 · 1	SCC			Provide interest rate
02/28/2020	Galgiani for Senate Long Beach, CA 908 Committee ID # 135	02		☐ IND ▼ COM ☐ OTH ☐ PTY ☐ SCC			1,500.00
Reason for Amer	idment:			E .	*Contributor Codes IND – Individual COM – Recipient Co OTH – Other (e.g., PTY – Political Party SCC – Small Contrib	business er	

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER	Date of		Date Stamp	CALIFORNIA 107		
	ell for County Supervisor 2020	This Filing02/28/2020			FORM 431	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)		Report No. 3/3/20-36			For Official Use Only	
(916)706-2677	1415889	Report No. <u>37372</u>				
STREET ADDRESS		☐ Amendment to Report No.				
CITY	STATE ZIP CODE	(explain below)				
Sacramento	CA 95814	No. of Pages	3			
1. Contribution	on(s) Received		-	-		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIB (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	UTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED
02/28/2020	Bill Quirk for Assembly 2020			<u>.</u>	,=	1,000.00
	Sacramento, CA 95815 Committee ID # 1414232		☑ COM ☐ OTH		•	☐ Check if Loan
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02/28/2020	Shingle Springs Band Miwok Indians	_				500.00
:	Placerville, CA 95667		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC	·		Check if Loan
02/28/2020	Shingle Springs Band Miwok Indians			-		500.00
	Placerville, CA 95667		☐ IND☐ COM☐ OTH☐ PTY			☐ Check if Loan
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497 Contribution Report Amounts				ts may be rounded to w	may be rounded to whole dollars.			497 CONTRIBUTION REPORT	
NAME OF FILER Holly J. Mitchell for County Supervisor 2020				Date of This Filing _	the same of the sa	IGELES COUNTY	CALIFO	CALIFORNIA 497	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)			Report No. 3/	/3/20-36 2020 MA	R 10 PM 4: 05		or Official Use Only		
(916) 706-2677 1415889 STREET ADDRESS				☐ Amendme	PROP	OSITION B UNIT	ON B UNIT		
CITY Sacramento	STATE ZIP CODE CA 95814			(explain below) No. of Pages					
1. Contributi	on(s) Received								
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONT		TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED		
02/28/2020	Friends of Mark St Sacramento, CA 958 Committee ID # 141	2020		☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC			1,500.0 Check if Loan Provide interest rate		
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					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan ———————————————————————————————————	
Reason for Amen	dment:	-				*Contributor Codes IND – Individual COM – Recipient Co OTH – Other (e.g., PTY – Political Party SCC – Small Contrib	ommittee (oth business ent	er than PTY or SCC)	

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