

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY LOS ANGELES COUNTY 497 CONTRIBUTION REPORT

NAME OF FILER Kathryn Barger for Supervisor, 2020			Date of This Filing 02/28/2020	Date Stamp 2020 MAR -2 PM 5:34	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONENUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1414462		Report No. 022820A	PROPOSITION B UNIT	
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages 2	
CITY Los Angeles	STATE CA	ZIP CODE 90017			

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
02/27/2020	Ellen Anten Los Angeles, CA 91436	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
02/27/2020	Lewis Anten Los Angeles, CA 91436	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lawyer Lewis Anten PC	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
02/27/2020	Ingrid Flintoft Los Angeles, CA 90045	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Computer Lab Manager LAUSD	1,500.00 <input type="checkbox"/> 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: _____

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02/27/2020	Phillip Kurzner Marina Del Rey, CA 90292	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Phillip Kurzner	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		 <input type="checkbox"/> Check if Loan _____% Provide interest rate
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