

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY

NAME OF FILER Working for a Better LA to Support Wesson for Supervisor 2020, Sponsored by Los Angeles County Federation of Labor AFL-CIO		Date of This Filing 10/10/2020 Date Stamp: 2020 OCT 13 AM 8:30	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable)	Report No. 101020A PROPOSITION B UNIT	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Los Angeles	STATE CA	ZIP CODE 90017	No. of Pages 1

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Herb Wesson				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD County Supervisor	DISTRICT NO. 2	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>

2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/09/2020	POS \$339,159.39	\$14,425.46
10/09/2020	LIT \$339,159.39	\$24,157.01
10/09/2020	POS \$339,159.39	\$52,252.28
10/09/2020	LIT \$339,159.39	\$78,787.49

Reason for Amendment: _____