## 497 Contribution Report

ier eentrissuserrieper		Amounts may be rounded to whole dollars.	PECEIVED OV	497 CONTRIBUTION REPORT
NAME OF FILER GEORGE GASCON FOR LA DISTRIC	T ATTORNEY 2020	Date of This Filing 10/15/2020	DS ANGELES COUNTY	CALIFORNIA 497
AREA CODE/PHONE NUMBER (818) 593-2949	I.D. NUMBER (if applicable) 1422183	Report No. 920-980-38	2020 OCT 15 PM 4: 20	
STREET ADDRESS		Amendment to Report No.	PROPOSITION B UNIT	
CITY	STATE ZIP	CODE (explain below)		
LOS ANGELES	CA 91	.364 No. of Pages 2		

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## 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
10/15/2020	BRIAN BUCHNER Los Angeles, CA 90045	IND COM OTH PTY SCC	CHIEF, HOMELESS OPERATIONS & STREET STRATEGIES OFFICE OF LOS ANGELES MAYOR ERIC GARCETTI	1,400.00
10/15/2020	MARISSA GOLDBERG PASADENA, CA 91107	IND □ COM □ OTH □ PTY □ SCC	EXECUTIVE DIRECTOR DOHENY EYE INSTITUTE	1,500.00
10/15/2020	SIGRID LOPEZ WHITTIER, CA 90602	IND COM OTH PTY SCC	PRESIDENT SINSEMILLA INDO GROUP	1,500.00

\*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:

497 Contribution Repor	t	Amounts may be rounded to whole dollars.	RECEIVED BY	497 CONTR BUTTION FLEPORT
NAME OF FILER GEORGE GASCON FOR LA DISTRIC	T ATTORNEY 2020	This Filing 10/15/2020	US ANGE Delesion UNTY	CALIFORNIA 497
AREA CODE/PHONE NUMBER (818) 593-2949	I.D. NUMBER (if applicable)	Report No. G20-GEO-36	ZO20 OCT 15 PM 4: 20 PROPOSITION B UNIT	For Official Use Only
STREET ADDRESS		to Report No.	- INDI GOTTION B UNIT	
CITY	STATE ZIP CC	DDE (explain below) No. of Pages 2		
LOS ANGELES	CA 9136	4 Ho. of ruges		

## 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
10/15/2020	THEFESA PRESTON-WERNER SAN FRANCISCO, CA 94108	<ul> <li>☑ IND</li> <li>□ COM</li> <li>□ OTH</li> <li>□ PTY</li> <li>□ SCC</li> </ul>	INVESTOR PRESTON-WERNER VENTURES	1,500.00
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Chec <sub>c</sub> if L <sub>C</sub> )an
		IND COM OTH PTY SCC		☐ (Check if Loan % Provide interest rate

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Reason for Amendment: