

# 497 Contribution Report

Amounts may be rounded to whole dollars.

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497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Vera 4 Sheriff 2022			<b>Date of This Filing</b> 03/22/2022 2022 MAR 22 PM 3:13		<b>CALIFORNIA FORM 497</b> For Official Use Only	
<b>AREA CODE/PHONE NUMBER</b> (310)488-2607		<b>I.D. NUMBER (if applicable)</b> 1438141		<b>Report No.</b> 5 PROPOSITION B UNIT EM		
<b>STREET ADDRESS</b> _____			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)			
<b>CITY</b> Covina	<b>STATE</b> CA	<b>ZIP CODE</b> 91722	<b>No. of Pages</b> 1			

## 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
03/22/2022	Golden West Trading Company Vernon, CA 90058	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00  <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
		<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

Reason for Amendment: \_\_\_\_\_

\*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