

# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY  
LOS ANGELES COUNTY  
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PROPOSITION B UNIT

497 CONTRIBUTION REPORT  
**CALIFORNIA FORM 497**  
For Official Use Only

**NAME OF FILER**  
ERIC SAPETTO SIDDALL FOR DISTRICT ATTORNEY 2024

**AREA CODE/PHONE NUMBER** (213) 624-6200  
**I.D. NUMBER (if applicable)** 1462682

**STREET ADDRESS**

**CITY** LOS ANGELES  
**STATE** CA  
**ZIP CODE** 90071

**Date of This Filing** 12/20/2023

**Report No.** 12202023

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 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
12/19/2023	JACKLIN AJEMIAN LOS ANGELES, CA 91403	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NOT EMPLOYED	1,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
12/19/2023	SCOTT WILKINSON BALTIMORE, MD 21217	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CHIEF EXECUTIVE OFFICER ALPHAVU, LLC	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

\*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: \_\_\_\_\_