

497 Contribution Report

Amounts may be rounded to whole dollars.

JAN 08 2024 *EM*

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LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

CALIFORNIA FORM 497

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Date Stamp
2024 JAN -9 AM 9:00

PROPOSITION B UNIT

NAME OF FILER Holly J. Mitchell for County Supervisor 2024		Date of This Filing <u>01/08/2024</u>	<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages <u>1</u>
AREA CODE/PHONE NUMBER (916) 706-2677	I.D. NUMBER (if applicable) 1458425			
STREET ADDRESS _____				
CITY Sacramento	STATE CA	ZIP CODE 95814		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
01/05/2024	Nancy Rubin Los Angeles, CA 90077	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
01/06/2024	Mary A Oconnell Los Angeles, CA 90017	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Asset Management Adams Oconnell Inc	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
01/08/2024	Progressive Era PAC San Francisco, CA 94104 Committee ID # 1449477	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		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: _____