497 Contrib	ution Report	Amoun	ts may be rounded to v	whole dollars.	ECEIVED BY JAN 1 /4	7074 EM 07 CONTRIBUTION REPORT
NAME OF FILER Nathan Hochman	for LA District Atto	rney 2024	Date of This Filing	LOS A	NGEL E Date Stanto: 17 CAL	IFORNIA 497
AREA CODE/PHONE	NUMBER	I.D. NUMBER (if applicable)			JAN 18 PM 12: 58	For Official Use Only
(949) 858-7448		1459571	Report No. 2	PRO	OSITION B UNIT	
STREET ADDRESS		,	☐ Amendmento Report No	ent	COTTON B GWT	
CITY		STATE ZIP CODE	(explain below)			
Irvine		CA 92618	No. of Pages	s3		
1. Contributi	on(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 EMPLOYEI (IF SELF-EMPLOYED, ENTER NAME OF BUSINES	
01/16/2024	Carolyn Singleton Santa Monica, CA 90403				Retired Retired	7,500.00
				COM OTH PTY SCC	Retifed	☐ Check if Loan
						Provide interest rate
01/16/2024	William Singleton Santa Monica, CA 90	403		<pre>     IND     COM     OTH     PTY     SCC </pre>	Retired Retired	7,500.00  Check if Loan  Provide interest rate
01/16/2024	William Singleton Santa Monica, CA 90403			E IND	Retired	1,500.00
				MIND COM OTH PTY SCC	Retired	☐ Check if Loan

	497 Contribution Report Amounts ma				RECEIVED BY JAN 1 7 2024	2014 CONTRIBUTION REPORT	
NAME OF FILER  Nathan Hochman for AREA CODE/PHONE NUMB  (949)858-7448  STREET ADDRESS  CITY  Irvine		ney 2024  D. NUMBER (if applicable)  1459571  STATE ZIP CODE  CA 92618	Date of This Filing Report No.  Amenda to Report No (explain below) No. of Page	2 02i-7	TOTAL IN IS PM 12:55	ORNIA 107	
1. Contribution(	(s) Received						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRI (IF COMMITTEE, ALSO ENTER LD. NUMBER)		TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	
	arolyn Singleton anta Monica, CA 904	03		IND COM OTH PTY SCC	Retired Retired	1,500.00  Check if Loan  Provide interest rate	
	iane Forester os Angeles, CA 9002	4		IND COM OTH PTY SCC	Retired Retired	2,500.00	
	elly Ann Holscher os Angeles, CA 9027	2		IND □ COM □ OTH □ PTY □ SCC	Homemaker None	2,500.00  Check if Loan  Provide interest rate	

NAME OF FILER	for LA District At	tornev 2024	Date of This Filing _	01/17/2024		CALIFORNIA 497	
AREA CODE/PHONE I		I.D. NUMBER (if applicable)			(4 JAN 18 PM 12: 58	For Official Use Only	
(949) 858-7448 1459571 STREET ADDRESS			Report No. 20	024-7 PF	ROPOSITION B UNIT		
			Amendment to Report No.		DI GOTTON D DINT		
CITY		STATE ZIP CODE	(explain below)	2			
Irvine		CA 92618	No. of Pages	3			
1. Contributi	on(s) Received						
DATE RECEIVED	FULL N	AME, STREET ADDRESS AND ZIP CODE OF CON' (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		
01/16/2024	Mark Holscher		K IND	Attorney Kirkland and Ellis	2,500.0		
	Los Angeles, CA	90272		☐ COM ☐ OTH ☐ PTY	KIIKIANU ANU EIIIS	☐ Check if Loan	
				□ scc		Provide interest rate	
01/17/2024	Stephen Kaplan				Investor Nalpak Capital	4,500.0	
	Santa Monica, CA		COM	Waipak Capitai			
				☐ OTH ☐ PTY		☐ Check if Loan	
				□ scc		Provide interest rate	
				☐ IND☐ COM☐ OTH☐ PTY		☐ Check if Loan	
				SCC		Provide interest rate	
	dment:				*Contributor Codes IND – Individual COM – Recipient Committee ( OTH – Other (e.g., business PTY – Political Party		