

# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY FEB 02 2024 EM  
 LOS ANGELES COUNTY  
 Date Stamp  
 2024 FEB -2 PM 5:00  
 PROPOSITION B UNIT

<b>NAME OF FILER</b> Lindsey Horvath Ballot Measure Committee for Accountability and Progress			<b>Date of This Filing</b> 02/02/2024	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b>	<b>I.D. NUMBER (if applicable)</b> 1463038		<b>Report No.</b> 02/01/2024	
<b>STREET ADDRESS</b>				
<b>CITY</b> Encino	<b>STATE</b> CA	<b>ZIP CODE</b> 91436	<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)	
			<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
02/01/2024	SEIU Local 2015 State PAC Los Angeles, CA 90057 Committee ID # 1378400	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50,000.00  <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
		<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: \_\_\_\_\_