497 Contrib	ution Report		Amount	s may be rounded to v	whole dollars.	REGEIVED BY	497 C	ONTRIBUTION REPORT	
NAME OF FILER  Eric Strong for LA County Sheriff 2  AREA CODE/PHONE NUMBER  (310) 975-5699  STREET ADDRESS		I.D. NUMBER (if applicable)  1438273  STATE ZIP CODE		Date of This Filing 04/20/20227022  Report No. 042022-1  Amendment to Report No. (explain below)  No. of Pages 1		APR 21 PM Is 20		FORNIA 497 For Official Use Only	
1. Contributi	on(s) Received	CA	90305						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRI (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED	
04/20/2022	Elisabeth Thomas Los Angeles, CA 90	068			IND COM OTH PTY SCC	Producer Self Employed - No Sepa Business Name	rate	1,500.00  Check if Loan  Provide interest rate	
					IND   COM   OTH   PTY   SCC			Check if Loan	
					IND   COM   OTH   PTY   SCC			Check if Loan	
Reason for Amer	dment:					*Contributor Codes IND – Individual COM – Recipient Co OTH – Other (e.g., I PTY – Political Party SCC – Small Contrib	business ent	1.70	