

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

RECEIVED BY
LOS ANGELES COUNTY
2022 MAY 16 PM 2:18
FAX
PROPOSITION B UNIT

NAME OF FILER Bob Hertzberg for Supervisor 2022		Date of This Filing 05/16/2022	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (916) 265-5732	I.D. NUMBER (if applicable) 1443772	Report No. 817645-CE		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages 1	
CITY Sacramento	STATE CA	ZIP CODE 95815		

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
05/13/2022	Azed Khan Surreyn, NY 10901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Paradigm Global Group, Inc.	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/13/2022	Azed Khan Surreyn, NY 10901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Paradigm Global Group, Inc.	1,500.00 <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: _____