

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Working Families and First Responders for Kathryn Barger for Supervisor 2024 Sponsored by Labor Organizations		Date of This Filing <u>12/7/2023</u>	RECEIVED BY LOS ANGELES COUNTY 2023 DEC -8 AM 10:19 PROPOSITION B UNIT	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1462438	Report No. <u>120723A</u>		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY Los Angeles	STATE CA	ZIP CODE 90017	No. of Pages <u>1</u>	

1. Contributions 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
12/06/2023	A Coalition for a Safer Los Angeles County Sponsored by Association for Los Angeles Deputy Sheriffs Monterey Park, CA 91755-7406 ID: 1359227	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$200,000. <input type="checkbox"/> Check if Loan ⁰⁰ _____ % Provide interest rate
12/06/2023	L.A. County Firefighters Local 1014, IAFF Organized, Ready & Committed In Emergencies El Monte, CA 91731-3002 ID: 1279318	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$625,000. <input type="checkbox"/> Check if Loan ⁰⁰ _____ % Provide interest rate

Reason for Amendment: _____

*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