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NAME OF FILER Nathan Hochman for LA District Attorney 2024				Date of This Filing	01/05/2024	Date Stamp 2024 JAN -5 PM 2: 5 CALIFORNIA 49		
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DATE RECEIVED	FULL NAM	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)			CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	
01/04/2024	Bennet M. Van de B Santa Moñica, CA 9				☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investor Bennet Van de Bunt	1,500.00 Check if Loan ** Provide interest rate	
01/05/2024	Lowell Milken Santa Monica, CA 9	0401			IND COM OTH PTY SCC	Officer Milken Family Foundation	6,000.00 Check if Loan Provide interest rate	
,					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan	
Reason for Amen	dment:					*Contributor Codes IND – Individual COM – Recipient Committee (oth OTH – Other (e.g., business en PTY – Political Party SCC – Small Contributor Commit	tity)	