

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY JAN 24 2024 *EM*

<b>NAME OF FILER</b> Working Families and First Responders for Kathryn Barger for Supervisor 2024 Sponsored by Labor Organizations			<b>Date of This Filing</b> <u>1/24/2024</u> <span style="float:right">Date Stamp</span>		<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (213) 452-6565		<b>I.D. NUMBER (if applicable)</b> 1462438	<b>Report No.</b> <u>01242024A</u> <span style="float:right">PROPOSITION B UNIT</span>		
<b>STREET ADDRESS</b> _____			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ <small>(explain below)</small>		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90017	<b>No. of Pages</b> <u>1</u>		

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> Kathryn Barger				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b> _____					
<b>OFFICE SOUGHT OR HELD</b> County Supervisor		<b>DISTRICT NO.</b> 5	<b>SUPPORT</b> <input checked="" type="checkbox"/>	<b>OPPOSE</b> <input type="checkbox"/>	<b>BALLOT NO./LETTER</b> _____		<b>JURISDICTION</b> _____	<b>SUPPORT</b> <input type="checkbox"/>	<b>OPPOSE</b> <input type="checkbox"/>

## 2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
01/23/2024	LIT \$1,068,857.98	\$29,191.71
01/23/2024	POS \$1,068,857.98	\$35,389.17

Reason for Amendment: \_\_\_\_\_  
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