

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

RECEIVED BY JAN 20 2024
LOS ANGELES COUNTY

NAME OF FILER Working Families and First Responders for Kathryn Barger for Supervisor 2024 Sponsored by Labor Organizations		Date of This Filing 1/20/2024	Date Stamp 2024 JAN 22 AM 8: PROPOSITION B UNIT	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1462438	Report No. 01202024		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. <small>(explain below)</small>		
CITY Los Angeles	STATE CA	ZIP CODE 90017	No. of Pages 2	

1. List Only One Candidate or Ballot Measure

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

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
01/19/2024	POS \$899,009.79	\$54,468.33
01/19/2024	LIT \$899,009.79	\$43,708.06
01/19/2024	POS \$899,009.79	\$30,298.77
01/19/2024	LIT \$899,009.79	\$24,937.68

Reason for Amendment: _____

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3. Contributions of \$100 or More 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	INTEREST RATES
01/18/2024	American Federation of State, County & Municipal Employees Local No. 685 Political Action Committee Vernon, CA 90058-3914 ID: 744558	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$75,000.00	If loan, enter interest rate, if any _____ %
01/19/2024	Los Angeles County Professional Peace Officers' Association Independent Expenditure Committee Sacramento, CA 95814-3970 ID: 810614	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$50,000.00	If loan, enter interest rate, if any _____ %

Reason for Amendment: _____

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

****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