

# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY

497 CONTRIBUTION REPORT

**NAME OF FILER**  
 YOUTH AND FAMILIES TAKING POWER SUPPORTING GEORGE GASCON FOR DISTRICT ATTORNEY 2020, SPONSORED BY LA VOICE ACTION

**AREA CODE/PHONE NUMBER** (213) 624-6200      **I.D. NUMBER (if applicable)** 1422237

**STREET ADDRESS**

**CITY** LOS ANGELES      **STATE** CA      **ZIP CODE** 90071

**Date of This Filing** 02/10/2020

**Report No.** 02102020

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 1

LOS ANGELES COUNTY  
 2020 FEB 10 AM 11:06  
 PROPOSITION B UNIT

**CALIFORNIA FORM 497**

For Official Use Only

## 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
02/07/2020	CARI TUNA PALO ALTO, CA 94301	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHILANTHROPIST CARI TUNA	80,000.00  <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
		<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: \_\_\_\_\_