497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Holly J. Mitchell for County	Supervisor 2020	Date of This Filing 03/02/2020 LOS ANGELES COUNTY CALIFORNIA FORM
AREA CODE/PHONE NUMBER (916) 706-2677	I.D. NUMBER (if applicable) 1415889	Report No. 3/3/20-37 2020 MAR 10 PM 4: 06 For Official Use Only
STREET ADDRESS		Amendment to Report No. PROPOSITION B UNIT
CITY	STATE ZIP CODE CA 95814	(explain below) No. of Pages2

DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	
03/01/2020	Lena Wu Sacramento, CA 95864	X IND COM OTH PTY SCC	Homemaker Homemaker	1,000.00 Check if Loan Provide interest rate	
03/02/2020	Black Women for Wellness Action Project Los Angeles, CA 90008 Committee ID # 1402813	☐ IND 図 COM ☐ OTH ☐ PTY ☐ SCC		1,000.00	
03/02/2020	Anna Caballero for Senate 2022 Sacramento, CA 95814 Committee ID # 1414451	☐ IND IX COM ☐ OTH ☐ PTY ☐ SCC		1,500.00 Check if Loan 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

NAME OF FILER Holly J. Mitchell for County Supervisor 2020			Date of This Filing03/02/2020		Date Stamp	CALIFORNIA 497		
(916)706-2677	REA CODE/PHONE NUMBER		Report No. 3/3/20-37			For Official Use Only		
STREET ADDRESS			Amendment to Report No.					
CITY Sacramento	•	STATE	ZIP CODE . 95814	(explain below) No. of Pages	2			
1. Contributi	on(s) Received	_	-			L		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			UTOR CONTRIBUTOR CODE *		IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
03/02/2020	Todd Gloria for Ass Encinitas, CA 92024 Committee ID # 1416			,	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC			1,500.00
03/02/2020	Sedrick Spencer Los Angeles, CA 900	15				Retired Retired		1,500.00 Check if Loan Provide interest rate
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC			Check if Loan ———————————————————————————————————
Reason for Amend	lment:				· .	*Contributor Codes IND – Individual COM – Recipient Com OTH – Other (e.g., bu PTY – Political Party SCC – Small Contribut	nmittee.(othe usiness entit	y)