ior continue	and it to post		Amoun	ts may be rounded to w	mole dollars.	RECEIVED BY	497 CON	TRIBUTION REPORT	
NAME OF FILER			119-119	Date of		US ANGRE Brain COUNT	CALIFOR	NIA 497	
GEORGE GASCON FO	OR LA DISTRICT ATTOR	NEY 2020		This Filing _	09/01/2020	6000 OFD 1 DW 1. FO	FORM		
AREA CODE/PHONE NUMBER I.		I.D. NUMBER (if applicable)				2020 SEP -1 PM 4: 58	For Off	For Official Use Only	
(818)593-2949 1422183			Report No. G20-GEO-11		DOODOGITION DUNIT				
STREET ADDRESS		1422103				PROPOSITION B UNIT	İ		
				☐ Amendme to Report No.					
CITY		STATE	ZIP CODE	(explain below)					
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1. Contributio	n(s) Received		r F						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTR (IF COMMITTEE, ALSO ENTERILD. NUMBER)			TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED	
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						IND Individual COM Recipient Cor	mmittee (other	than PTY or SCC)	
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Reason for Amend	ment:	20				PTY – Political Party SCC – Small Contribu			
						SCC - Sman Contribu	noi committee	01	

497 Contribution Report