

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 <u>10/05/2020</u> Report No. <u>11/3/20-38</u> <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages <u>1</u>		RECEIVED BY LOS ANGELES COUNTY 2020 OCT -6 AM 8:11 PROPOSITION B UNIT		CALIFORNIA FORM 497 For Official Use Only	
AREA CODE/PHONE NUMBER (916) 706-2677		I.D. NUMBER (if applicable) 1415889						
STREET ADDRESS _____ _____								
CITY Sacramento		STATE CA		ZIP CODE 95814				

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
10/05/2020	Dignity CA SEIU Local 2015 Los Angeles, CA 90057 Committee ID # 1357256	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/05/2020	Jorge Nuno Los Angeles, CA 90011	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO NTS Communications	1,000.00 <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

*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: _____