

497 Contribution Report

Amounts may be rounded to whole dollars.

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STREET ADDRESS:
CITY: Los Angeles STATE: CA ZIP CODE: 90017

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PROPOSITION B UNIT

1. Contributions Received

Table with 5 columns: DATE RECEIVED, FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR, CONTRIBUTOR CODE, IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER, AMOUNT RECEIVED. Contains 3 rows of contribution data.

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

FPPC Form 497 (Jul/2016)
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