497 Contribution Report Amounts may be rounded to whole dollars. RECEIVED BY 497 CONTRIBUTION REPORT NAME OF FILER Date Stamp **CALIFORNIA** Date of 05/20/2022 This Filing _ Neighbors for Lindsey Horvath for Supervisor 2022 FORM AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) For Official Use Only Report No. 052022 (510)423-4300 1446284 PROPOSITION BUNKT STREET ADDRESS Amendment to Report No. (explain below) CITY STATE ZIP CODE No. of Pages ___ Oakland CA 94607 1. Contribution(s) Received IF AN INDIVIDUAL, DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR AMOUNT ENTER OCCUPATION AND EMPLOYER RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * RECEIVED (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) 05/19/2022 Mani Brothers, LLC(Simon Mani) 10,000.00 West Hollywood, CA 90069 ☐ COM X OTH ☐ Check if Loan ☐ PTY □ scc Provide interest rate 05/19/2022 Adam Kroll Strategy 1,500.00 X IND CSS West Hollywood, CA 90046 ☐ COM □ OTH ☐ Check if Loan ☐ PTY □ SCC Provide interest rate 05/20/2022 Andrew Bilanzich Site Administrator 5,000.00 X IND Bam LLC Salt Lake, UT 84118 ☐ COM □ OTH ☐ Check if Loan ☐ PTY □ scc Provide interest rate *Contributor Codes IND - Individual COM – Recipient Committee (other than PTY or SCC)

Reason for Amendment:

FPPC Form 497 (Feb/2019)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

PTY - Political Party

497 Contribution Report

NAME OF FILER

Amounts may be rounded to whole dollars.

Date of

497 CONTRIBUTION REPORT DEPENDED ON CALIFORNIA

Neighbors for Lindsey Horvath for Supervisor 2022				This Filing _	05/20/2022	A MAGERICO COMBAS.	FORM 49/	
AREA CODE/PHONE NUMBER (510) 423-4300		I.D. NUMBER (if applicable) 1446284		Report No. 05	2022	22MAY 20 PM 4: 28	For	Official Use Only
STREET ADDRESS				☐ Amendme to Report No.	nt	ROPOSITION BUNIT		
CITY		STATE	ZIP CODE	(explain below) No. of Pages	2			
Oakland		CA	94607	ito: o: r agoo				
1. Contributio	on(s) Received		•					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)				CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
05/20/2022	Christopher Shane West Hollywood, CA 90069					Not Employed N/A		1,500.00
					□ PTY □ SCC			% Provide interest rate
05/20/2022	David Vela Montebello, CA 9064	0			IND COM OTH PTY SCC	Sr. Vice President Lee Andrews Group		1,500.00 Check if Loan ** Provide interest rate
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC			Check if Loan
Reason for Amendment:						*Contributor Codes IND – Individual COM – Recipient Co OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	ousiness ent	