

497 Contribution Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY
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11/3/22 EM
PROVISION UNIT

CALIFORNIA FORM 497
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NAME OF FILER
First Responders in Support of Bob Hertzberg for Supervisor 2022, Sponsored by the Los Angeles County Federation of Labor, AFL-CIO

AREA CODE/PHONE NUMBER (213) 452-6565 **I.D. NUMBER (if applicable)** 1453855

STREET ADDRESS

CITY Los Angeles **STATE** CA **ZIP CODE** 90006

Date of This Filing 11/3/2022

Report No. 110322A

Amendment to Report No. (explain below)

No. of Pages 1

1. Contributions Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
11/02/2022	SEIU United Service Workers West (SEIU USWW) Los Angeles, CA 90015-3310 ID: 1443357	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$20,000.00 <input type="checkbox"/> 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