

497 Contribution Report

Amounts may be rounded to whole dollars.

JAN 26 2024 EM

497 CONTRIBUTION REPORT

NAME OF FILER Cruikshank for Supervisor 2024		Date of This Filing 01/26/2024 05:29	RECEIVED BY LOS ANGELES CO 2024 JAN 29 AM 8 14 PROPOSITION B UNIT CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 424-772-8648	I.D. NUMBER (if applicable) 1457936	Report No. 502	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Rancho Palos Verdes, CA 90275	STATE	ZIP CODE	

1. Contribution(s) 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
2024-01-26	John M. Cruikshank Rancho Palos Verdes, CA 90275	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President & CEO JMC2	3,000.00 <input checked="" type="checkbox"/> Check if Loan 0 % 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

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RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2024 JAN 29 AM 8:14
PROPOSITION B UNIT

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CALIFORNIA FORM 497

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Date of This Filing 01/26/2024 05:29:2024

Report No. _____

Amendment to Report No. _____
(explain below)

No. of Pages 3

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2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment: _____

FORM	REFERENCE	NOTES
CA 497	TEXT -15707	Contribution in the form of a Loan Received. Interest on Loan is: 0