497 Contribution Report Amounts may be rounded to whole dollars. NAME OF FILER Date of Janice Hahn for Supervisor 2024 2/14/2024 This Filing 2024 FEB 14 PM 3: 58 **FORM** For Official Use Only AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) Report No. 021424A PROPOSITION B UNIT (213) 452-6565 1457362 Amendment STREET ADDRESS to Report No. (explain below) STATE ZIP CODE CITY No. of Pages Los Angeles CA 90017

1. Contributions Received

DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *		RECEIVED
02/13/2024	Gil C. Legaspi Downey, CA 90240-4015	✓ IND □COM □OTH □PTY □SCC	Manager Reliable Property Management	\$1,000.00 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