NAME OF FILER INDEPENDENT COMMITTEE TO RE-ELECT KATHRYN BARGER FOR LA COUNTY SUPERVISOR 2024 FOR RESPONSIBLE GOVERNMENT					Date of This Filing 02/20/2024	THE COUNT	FORM 2	496	
AREA CODE/PHONE NUMBER			BER (ifapplicable)			1024 FEB 20 PM 1: 30	For Official Use (	Only	
(213)624-6200	1464782			Report No. 022020241E					
STREET ADDRESS					Amendment to Report No.	PROPOSITION B UNIT			
TY		STATE ZIPCODE			(explain below)				
LOS ANGELES		CA	90071		No. of Pages1	LOCAL DESCRIPTION OF THE PARTY			
. List Only One Ca	andidate or Ballot Meas	ure							
NAME OF CANDIDATE SUPPORTED OR OPPOSED  KATHRYN BARGER					NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED				
OFFICE SOUGHT OR HELD County Supervisor LOS ANGELES COUNTY, #5		DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE	
2. Independent Exp	enditures Made Attach ad	ditional informat	ion on appropri	iately labeled	continuation sheets.				
DATE		DESCRIPTION OF EXPENDITURE						AMOUNT	
02/19/2024	CANVASSING Cumulative to date	e total \$750	00,00				2	25,000.0	