

497 Contribution Report

Amounts may be rounded to whole dollars.

<b>NAME OF FILER</b> Hatami for District Attorney 2024		<b>Date of This Filing</b> 2/26/2024	RECEIVED LOS ANGELES COUNTY FEB 27 AM 8:24 PROPOSITION B UNIT	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (949) 441-5352	<b>I.D. NUMBER (if applicable)</b> 1458513	<b>Report No.</b> 2402262024		
<b>STREET ADDRESS</b>		<input type="checkbox"/> Amendment to Report No. (explain below)		
<b>CITY</b> Irvine	<b>STATE</b> CA	<b>ZIP CODE</b> 92612	<b>No. of Pages</b> 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
02/23/2024	Perry Rod Las Vegas, NV 89121-3966	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Fund Manager Rod Capital	\$1,000.00 <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