

# 497 Contribution Report

Amounts may be rounded to whole dollars.

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PROPOSITION B UNIT

497 CONTRIBUTION REPORT  
CALIFORNIA FORM 497  
For Official Use Only

**NAME OF FILER**  
JAN PERRY FOR SUPERVISOR 2020 DISTRICT 2

**AREA CODE/PHONE NUMBER** (323)655-4065  
**I.D. NUMBER (if applicable)** 1415080

**STREET ADDRESS**

**CITY** Encino  
**STATE** CA  
**ZIP CODE** 9143

**Date of This Filing** 02/28/2020

**Report No.** 02/27/2020

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 1

## 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
02/27/2020	Michael L Hogan Los Angeles, CA 90005	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor Compass	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
02/27/2020	Pecky Y Lacanilao Compton, CA 90222	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administrator US Post Office	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
02/27/2020	Silver Group LA LLC Los Angeles, CA 90017	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <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