

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

| | | | | | |
|--|---|------------------------------------|--|---|---|
| NAME OF FILER Holly J. Mitchell for County Supervisor 2020 | | | Date of This Filing <u>08/20/2020</u> | RECEIVED BY LOS ANGELES COUNTY 2020 AUG 20 PM 3:43 PROPOSITION B UNIT | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER (916) 706-2677 | I.D. NUMBER (if applicable) 1415889 | Report No. <u>11/3/20-9</u> | | | |
| STREET ADDRESS _____ | | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Sacramento | STATE CA | ZIP CODE 95814 | No. of Pages <u>1</u> | | |

1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED |
|---------------|--|---|--|---|
| 08/20/2020 | Abby Sher Santa Monica, CA 90405 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired Retired | 1,250.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <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