497 Contribւ	ution Report		Amounts m	nay be rounded to w	hole dollars.	RECEIVED BY	- 497 CONTRIBUTION REPORT
NAME OF FILER Neighbors for Lindsey Horvath for Supervisor 2022 AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)			ile)	Date of This Filing 08/23/2022 Report No. 082322		Date Stamp 122 AUG 24 AMII: 42 ROPOSITION B UNIT	FORM 497 For Official Use Only
(510) 423-4300 STREET ADDRESS		STATE	ZIP CODE	Amendme to Report No. (explain below) No. of Pages	ent 	Em 8/23/2022	
1. Contribution	on(s) Received	CA	94607				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			BUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF	
08/22/2022	Planned Parenthood Sacramento, CA 9581 Committee ID # 9716	14	Los Angeles County	y Action Fund	☐ IND IX COM ☐ OTH ☐ PTY ☐ SCC	-	□ Check if Loan
08/22/2022	Solis for Superviso Encino, CA 91436 Committee ID # 1436				☐ IND IX COM ☐ OTH ☐ PTY ☐ SCC		□ Check if Loan
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC		☐ Check if Loan ———————————————————————————————————
Reason for Amen	dment:					*Contributor Codes IND – Individual COM – Recipient Cor OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	