

497 Contribution Report

NAME OF FILER Lindsey Horvath for Supervisor 2022		Date of This Filing 09/13/2022	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE / PHONE NUMBER (323) 655-4065	I.D. Number (if applicable) 1437724	Report No. LATE-20220912	RECEIVED BY LOS ANGELES COUNTY 9/13/22 FAX 2022 SEP 13 PM 4:52	
STREET ADDRESS		<input type="checkbox"/> Amendment to RptNo. _____		
CITY Encino	STATE CA	ZIP CODE 91436	No. of Pages: 1	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, OCCUPATION & EMPLOYER or BUSINESS NAME IF COMMITTEE - ID NUMBER	AMOUNT RECEIVED
09/12/2022	AFSCME Local 3634 Los Angeles CA 90020 ID No. 1255127	COM		1,500.00 <input type="checkbox"/> Check if Loan _____ % Provide interest rate
09/12/2022	Wendy Dio-Padavona Encino CA 91316	IND	n/a Unemployed	1,500.00 <input type="checkbox"/> Check if Loan _____ % Provide interest rate
09/12/2022	Thomas Knapp Pacific Palisades CA 90272	IND	Kerlan Jobe Institute Orthopaedic Surgeon	1,500.00 <input type="checkbox"/> Check if Loan _____ % Provide interest rate

** 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