

**497 Contribution Report**

Amounts may be rounded to whole dollars.

RECEIVED BY **EM.**  
 LOS ANGELES COUNTY  
 Date Stamp  
**2023 DEC -8 AM 8:00**  
**PROPOSITION B UNIT**

**CALIFORNIA FORM 497**  
 For Official Use Only

**NAME OF FILER**  
 Gascon for LA District Attorney 2024

**AREA CODE/PHONE NUMBER** (213) 452-6565      **I.D. NUMBER (if applicable)** 1457094

**STREET ADDRESS**  
 777 S Figueroa Street. Ste. 4050

**CITY** Los Angeles      **STATE** CA      **ZIP CODE** 90017

**Date of This Filing** 12/7/2023

**Report No.** 120723A

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

**No. of Pages** 2

**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
12/06/2023	Dan Simon 223 Carroll Canal # 0 Venice, CA 90291-4522	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor USC	\$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

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LOS ANGELES COUNTY

<b>NAME OF FILER</b> Gascon for LA District Attorney 2024		<b>Date of This Filing</b> 12/7/2023	Date Stamp <b>2023 DEC -8 AM 7:59</b>	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (213) 452-6565	<b>I.D. NUMBER (if applicable)</b> 1457094	<b>Report No.</b> 120723A		
<b>STREET ADDRESS</b>		<input type="checkbox"/> <b>Amendment to Report No.</b> (explain below)	<b>PROPOSITION 8 UNIT</b>	
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90017		

**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
12/06/2023	Laura Gowen Los Angeles, CA 90039-3012	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant/Attorney Laura Gowen	\$1,000.00 <input type="checkbox"/> Check if Loan Provide interest rate
12/06/2023	Ajay Handa Palos Verdes Estates, CA 90274-2082	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Columbus Technologies And Services Inc.	\$1,500.00 <input type="checkbox"/> Check if Loan Provide interest rate
12/06/2023	Rama Radhakrishnan Thousand Oaks, CA 91362-5343	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Global Processor Inc.	\$1,000.00 <input type="checkbox"/> Check if Loan Provide interest rate

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