

497 Contribution Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

NAME OF FILER Nathan Hochman for LA District Attorney 2024		Date of This Filing <u>01/09/2024</u> 2024 JAN 10 AM 9:02	Date Stamp CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (949) 858-7448	I.D. NUMBER (if applicable) 1459571	Report No. <u>2024-2</u> PROPOSITION B UNIT	
STREET ADDRESS CITY Irvine		STATE CA	ZIP CODE 92618
		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
		No. of Pages <u>1</u>	

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
01/08/2024	Bob Cohen Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cohen and Marzban Law Corp	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
01/09/2024	Paul G. Haaga, Jr La Canada Flintridge, CA 91011	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	1,000.00 <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

*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

Reason for Amendment: _____