

497 Contribution Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY

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2024 JAN 25 PM 2:24

PROPOSITION B UNIT

CALIFORNIA
FORM 497

For Official Use Only

NAME OF FILER Hatami for District Attorney 2024		Date of This Filing 1/25/2024
AREA CODE/PHONE NUMBER (949) 441-5352	I.D. NUMBER (if applicable) 1458513	Report No. 240125
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)
CITY Irvine	STATE CA	ZIP CODE 92612
		No. of Pages 3

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
01/24/2024	Eilat Benaron Los Angeles, CA 90035-4018	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	\$7,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
01/24/2024	Reeve Benaron Los Angeles, CA 90035-4018	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Healthcare executive Intrivo	\$7,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
01/24/2024	Barbara Chodorow Los Angeles, CA 90067-3844	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Assistant Marketing De Castro West Chodorow	\$1,500.00 <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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01/24/2024	Anne Ruderman Los Angeles, CA 90069-1233 Reference # 10624274	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	\$2,072.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

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IND - Individual
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OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Notes and Memos

FORM/SCHEDULE	REFERENCE NUMBER (IF APPLICABLE)	TEXT
F497P1	10624274	In-Kind Contribution Received

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