


497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY FEB 09 2024 

LOS ANGELES COUNTY Date Stamp CALIFORNIA FORM **497**

2024 FEB -9 PM 4:17

PROPOSITION B UNIT

For Official Use Only

<b>NAME OF FILER</b> Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hahn Ballot Measure Committee		<b>Date of This Filing</b> <u>2/9/2024</u>
<b>AREA CODE/PHONE NUMBER</b> (213) 452-6565	<b>I.D. NUMBER (if applicable)</b> 1399573	<b>Report No.</b> <u>020924A</u>
<b>STREET ADDRESS</b> _____		<input type="checkbox"/> <b>Amendment to Report No. (explain below)</b> _____
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90017
		<b>No. of Pages</b> <u>1</u>

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
02/08/2024	Los Angeles County Firefighters Local 1014 Firefighters Education Project  El Monte, CA 91731-3002 ID: 1279076	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$20,000.00  <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