

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY FEB 02 2024 EM
 LOS ANGELES COUNTY 497 CONTRIBUTION REPORT
 Date Stamp
 2024 FEB -5 AM 8:03
 PROPOSITION B UNIT
CALIFORNIA FORM 497
 For Official Use Only

NAME OF FILER
 Holly J. Mitchell for County Supervisor 2024

AREA CODE/PHONE NUMBER (916) 706-2677
I.D. NUMBER (if applicable) 1458425

STREET ADDRESS

CITY Sacramento **STATE** CA **ZIP CODE** 95814

Date of This Filing 02/02/2024

Report No. 3/5/24-21

Amendment to Report No. _____
 (explain below)

No. of Pages 1

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
02/01/2024	Bob Giroux Sacramento, CA 95814	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lobbyist Lang Hansen Giroux & Kidane	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
02/01/2024	David Bohnett Beverly Hills, CA 90212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor Baroda Ventures LLC	1,500.00 <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

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