

# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY FEB 03 2024  
 LOS ANGELES COUNTY  
 Date Stamp  
 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

**AREACODE/PHONE NUMBER** (916) 706-2677  
**I.D. NUMBER (if applicable)** 1458425

**STREET ADDRESS**

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

**Date of This Filing** 02/03/2024

**Report No.** 3/5/24-22

**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	Glen Dake Los Angeles, CA 90063	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Landscape Architect Gdml Holdings Inc	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
		<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