

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY FEB 01 2024 EM
 LOS ANGELES COUNTY
 Date Stamp
 2024 FEB -2 AM 8:01
 PROPOSITION B UNIT

CALIFORNIA
 FORM 497
 For Official Use Only

NAME OF FILER
 Janice Hahn for Supervisor 2024

AREA CODE/PHONE NUMBER
 (213) 452-6565

I.D. NUMBER (if applicable)
 1457362

STREET ADDRESS

CITY
 Los Angeles

STATE
 CA

ZIP CODE
 90017

Date of This Filing 2/1/2024

Report No. 020124A

Amendment to Report No. (explain below)

No. of Pages 1

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
01/31/2024	Los Angeles Charter Advocates for Great Public Schools All Purpose Account Sacramento, CA 95815-4415 ID: 1445480	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
01/31/2024	Pat West Cypress, CA 90630-3544	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Pat West	\$1,000.00 <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