

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

RECEIVED BY MAR 02 2024
 LOS ANGELES COUNTY
 Date Stamp
 2024 MAR -4 AM 8:08
 PROPOSITION B UNIT

CALIFORNIA FORM 496

For Official Use Only

NAME OF FILER
 Working Families and First Responders for Kathryn Barger for Supervisor 2024
 Sponsored by Labor Organizations

AREA CODE/PHONE NUMBER
 (213) 452-6565

I.D. NUMBER (If applicable)
 1462438

STREET ADDRESS

CITY
 Los Angeles

STATE
 CA

ZIP CODE
 90017

Date of This Filing
 3/2/2024

Report No.
 03022024A

Amendment to Report No.
 (explain below)

No. of Pages
 1

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED
 Kathryn Barger

OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE
County Supervisor	5	<input checked="" type="checkbox"/>	<input type="checkbox"/>

NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED

BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
		<input type="checkbox"/>	<input type="checkbox"/>

2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
03/01/2024	TEL \$2,676,808.82	\$30,000.00

Reason for Amendment: _____