

497 Contribution Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY
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PROPOSITION B UNIT

CALIFORNIA
FORM 497
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NAME OF FILER Wesson for Supervisor 2020		Date of This Filing 8/6/2020
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1414475	Report No. 080620A
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)
CITY Los Angeles	STATE CA	ZIP CODE 90017
		No. of Pages 2

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
08/05/2020	Bijan Afar North Hollywood, CA 91601-3228	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dentist Bijan Afar	\$1,500.00 <input type="checkbox"/> Check if Loan Provide interest rate
08/05/2020	Bryan Boley Woodland Hills, CA 91364-4229	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Owner Bryan Boley	\$1,500.00 <input type="checkbox"/> Check if Loan Provide interest rate
08/05/2020	James Silverwood San Diego, CA 92127-1286	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Affirmed Housing	\$1,500.00 <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

FPPC Form 497 (Jul/2016)
FPPC Advice: advice@fppc.ca.gov (856/275-3772)
www.fppc.ca.gov

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AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1414475	Report No. 080620A		
STREET ADDRESS 777 S. Figueroa St., Ste. 4050		<input type="checkbox"/> Amendment to Report No. (explain below)	PROPOSITION B UNIT	
CITY Los Angeles	STATE CA	ZIP CODE 90017		

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08/05/2020	Thorne Smith Los Angeles, CA 90008-2652	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Entrepreneur Thorne Smith	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

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