

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY FEB 13 2024 **EM**
 LOS ANGELES COUNTY 497 CONTRIBUTION REPORT

Date Stamp
 2024 FEB 14 AM 8:00

CALIFORNIA FORM **497**
 For Official Use Only

PROPOSITION B UNIT

NAME OF FILER Jeff Chemerinsky for District Attorney 2024		
AREA CODE/PHONE NUMBER (510) 423-4300	I.D. NUMBER (if applicable) 1462948	
STREET ADDRESS		
CITY Oakland	STATE CA	ZIP CODE 94607

Date of This Filing 02/13/2024

Report No. 021324

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 <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
02/12/2024	Rafael Bernardino Sherman Oaks, CA 91403	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Hobson, Bernardino & Davis, LLP	6,000.00 <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