

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

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496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER CALIFORNIA ALLIANCE OF FAMILY OWNED BUSINESSES PAC		Date of This Filing 02/27/2024 Report No. 20240223CH <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages 1	Date Stamp LOS ANGELES COUNTY 2024 FEB 27 PM 1:52 PROPOSITION B UNIT	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (415) 389-6800	I.D. NUMBER (if applicable) 1465611			
STREET ADDRESS _____				
CITY SAN RAFAEL	STATE CA	ZIP CODE 94901		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED CHRIS HOLDEN				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD County Supervisor LOS ANGELES COUNTY	DISTRICT NO. District 5	SUPPORT	OPPOSE X	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
02/23/2024	MAILER Cumulative to date total \$629322.47	143,269.03

Reason for Amendment: _____