

497 Contribution Report

Amounts may be rounded to whole dollars.

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CALIFORNIA FORM 497
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NAME OF FILER
Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

AREA CODE/PHONE NUMBER
(213) 381-5611

I.D. NUMBER (if applicable)
1424793

STREET ADDRESS

CITY
Los Angeles

STATE
CA

ZIP CODE
90017

Date of This Filing
2/19/2020

Report No.
021920A

Amendment to Report No.
(explain below)

No. of Pages
1

PROPOSITION B UNIT

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
02/18/2020	Los Angeles County Professional Peace Officers' Association Independent Expenditure Committee Sacramento, CA 95814-3970 ID: 810614	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$165,000. <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 (866/275-3772)
 www.fppc.ca.gov