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### 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

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**CALIFORNIA FORM 496**  
For Official Use Only

**NAME OF FILER**  
Working for a Better LA to Support Wesson for Supervisor 2020, Sponsored by Los Angeles County Federation of Labor AFL-CIO

**AREA CODE/PHONE NUMBER**  
(213) 452-6565

**STREET ADDRESS**

**CITY**  
Los Angeles

**STATE**  
CA

**ZIP CODE**  
90017

**Date of This Filing** 10/24/2020

**Report No.** 102420A

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 1

PROPOSITION B UNIT

#### 1. List Only One Candidate or Ballot Measure

**NAME OF CANDIDATE SUPPORTED OR OPPOSED**  
Herb Wesson

**OFFICE SOUGHT OR HELD**  
County Supervisor

**DISTRICT NO.** 2

**SUPPORT**  **OPPOSE**

**NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED**

**BALLOT NO./LETTER**

**JURISDICTION**

**SUPPORT**  **OPPOSE**

#### 2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/23/2020	LIT \$957,819.89	\$24,157.01
10/23/2020	POS \$957,819.89	\$13,325.46

Reason for Amendment: \_\_\_\_\_