

497 Contribution Report

Amounts may be rounded to whole dollars.

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 PROPOSITION B UNIT

497 CONTRIBUTION REPORT

CALIFORNIA FORM 497
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NAME OF FILER
 Communities United for Holly Mitchell for LA Supervisor 2020

AREA CODE/PHONE NUMBER (916) 285-5733
I.D. NUMBER (if applicable) 1424932

STREET ADDRESS

CITY Sacramento **STATE** CA **ZIP CODE** 95815

Date of This Filing 10/23/2020

Report No. 6954165-TK

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 (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
10/23/2020	Grace Public Affairs, LLC Sacramento, CA 95814 Loan Received; 0% Interest; Authorizing Officer: Dana Williamson	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		20,000.00 <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

*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

Reason for Amendment: _____
