

RECEIVED BY
LOS ANGELES COUNTY

2022 MAY -6 AM 8:58

PROPOSITION B UNIT

497 Con

NAME OF
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AREA CODI
(213) 4

STREET AD

CITY
Los Ang

1. Cont

D.
REC

05/04

Reason fo

Contribution Report

Amounts may be rounded to whole dollars.

PF FILER for Supervisor 2022		Date of This Filing 5/5/2022	RECEIVED BY LOS ANGELES COUNTY 2022 MAY -6 AM 8:58 PROPOSITION B UNIT	CALIFORNIA FORM 497 For Official Use Only
DE/PHONE NUMBER 452-6565	I.D. NUMBER (if applicable) 1442984	Report No. 05/04/2022		
ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)		
Los Angeles STATE CA ZIP CODE 90017		No. of Pages 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
4/2022	Barbara Shuler Beverly Hills, CA 90210-1218	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	\$1,200.00 <input type="checkbox"/> Check if Loan _____ % Provide interest rate

or 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

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