

# 497 Contribution Report

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**CALIFORNIA FORM 497**  
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NAME OF FILER  
Lindsey Horvath for Supervisor 2022

AREA CODE / PHONE NUMBER  
(323) 655-4065

I.D. Number (if applicable)  
1437724

STREET ADDRESS

CITY STATE ZIP CODE  
Encino CA 91436

Date of This Filing 08/25/2022

Report No. LATE-20220824

Amendment to RptNo. \_\_\_\_\_

No. of Pages: 1

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, OCCUPATION & EMPLOYER or BUSINESS NAME IF COMMITTEE - ID NUMBER	AMOUNT RECEIVED
08/24/2022	John W Baackes  Los Angeles CA 90004	IND	n/a Info	1,500.00  <input type="checkbox"/> Check if Loan _____ % Provide interest rate
08/24/2022	Roberta Conroy  Santa Monica CA 90402	IND	n/a Unemployed	1,500.00  <input type="checkbox"/> Check if Loan _____ % Provide interest rate
08/24/2022	Louise McCarthy  Los Angeles CA 90043	IND	Community Clinic Association of LA Cou President	1,500.00  <input type="checkbox"/> Check if Loan _____ % Provide interest rate
08/24/2022	Elizabeth A Thomas  Los Angeles CA 90068	IND	Elizabeth A Thomas Producer	1,500.00  <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