

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY JAN 17 2024 *FM*

NAME OF FILER Working Families and First Responders for Kathryn Barger for Supervisor 2024 Sponsored by Labor Organizations			Date of This Filing 1/17/2024	Date Stamp 2024 JAN 18 AM 7:50	CALIFORNIA FORM 496 <small>For Official Use Only</small>
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (If applicable) 1462438		Report No. 01172024A	PROPOSITION B UNIT	
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No.		
CITY Los Angeles	STATE CA	ZIP CODE 90017	<small>(explain below)</small> No. of Pages 1		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Kathryn Barger				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD County Supervisor	DISTRICT NO. 5	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>

2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
01/16/2024	LIT \$745,596.95	\$33,892.25
01/16/2024	POS \$745,596.95	\$77,275.82

Reason for Amendment: _____