

497 Contribution Report

Amounts may be rounded to whole dollars.

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FEB 09 2024
497 CONTRIBUTION REPORT

CALIFORNIA
FORM 497
For Official Use Only

NAME OF FILER John McKinney for LA District Attorney 2024		
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1458551	
STREET ADDRESS		
CITY	STATE	ZIP CODE
Encino	CA	91436

Date of This Filing 02/09/2024

Report No. 02/08/2024

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 <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
02/08/2024	Steve Hoffman Henderson , NV 89052	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	6,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
02/08/2024	Jason P. Lustig Seal Beach, CA 90740	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney L.A. DA's Office	3,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
02/08/2024	Mayra Wiessner Rolling Hills Estate, CA 90274	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired n/a	1,000.00 <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

Reason for Amendment: _____