

# 497 Contribution Report

Amounts may be rounded to whole dollars

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PROPOSITION B UNIT

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022			<b>Date of This Filing</b> 02/11/2024	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (213) 624-6200	<b>I.D. NUMBER (if applicable)</b> 1445830		<b>Report No.</b> 021220	
<b>STREET ADDRESS</b>			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)	
<b>CITY</b> LOS ANGELES	<b>STATE</b> CA	<b>ZIP CODE</b> 90071	<b>No. of Pages</b> 1	

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
02/09/2024	CITIZENS FOR KATHRYN BARGER FOR SUPERVISOR 2024 OPPOSING CAREER POLITICIANS (ID# 1466037) LOS ANGELES, CA 90071	KATHRYN BARGER (IE COMMITTEE) County Supervisor LOS ANGELES COUNTY, #5	6,975.82	03/05/2024

Reason for Amendment: \_\_\_\_\_