

497 Contribution Report

Amounts may be rounded to whole dollars.

FEB 26 2024 TM

497 CONTRIBUTION REPORT

NAME OF FILER INDEPENDENT COMMITTEE TO RE-ELECT KATHRYN BARGER FOR LA COUNTY SUPERVISOR 2024 FOR RESPONSIBLE GOVERNMENT			Date of This Filing <u>02/26/2024</u>	RECEIVED BY LOS ANGELES COUNTY 2024 FEB 26 AM 10:49 PROPOSITION B UNIT	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (213) 624-6200	I.D. NUMBER (if applicable) 1464782	Report No. <u>02262024</u>			
STREET ADDRESS CITY STATE ZIP CODE LOS ANGELES CA 90071			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		

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
02/23/2024	BUILDING INDUSTRY ASSOCIATION OF SOUTHERN CALIFORNIA PAC LOS ANGELES, CA 90071 Committee ID # 741733	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		19,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for 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