


497 Contribution Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY

FEB 29 2024 
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>02/29/2024</u>	Date Stamp 2024 MAR -1 AM 8:21 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>02292024</u>		
STREET ADDRESS _____		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY LOS ANGELES	STATE CA	ZIP CODE 90071	No. of Pages <u>1</u>	

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)
02/28/2024	CITIZENS FOR KATHRYN BARGER FOR SUPERVISOR 2024 OPPOSING CAREER POLITICIANS (ID# 1466037) LOS ANGELES, CA 90071	KATHRYN BARGER (IE COMMITTEE) County Supervisor COUNTY OF LOS ANGELES, #5	5,000.00	03/05/2024
NONMONETARY: RESEARCH				

Reason for Amendment: _____