497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER GEORGE GASCON FOR LA DISTRICT ATTORNEY 2020	**Date of** **This Filing** ___01/22/2020___	**CALIFORNIA** **FORM** **497**

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LOS ANGELES COUNTY
2020 JAN 22 PM 2:49
PROPOSITION B UNIT

AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*	**Report No.** P20-GEO-24	For Official Use Only
(818) 593-2949	1422183		

STREET ADDRESS	☐ **Amendment** **to Report No.** _____ (explain below)

CITY	STATE	ZIP CODE	**No. of Pages** ___1___
LOS ANGELES	CA	91364	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
01/22/2020	SARAH BARTON SEATTLE, WA 98112	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	NOT EMPLOYED NONE	1,500.00 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ 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: _____