

# 497 Contribution Report

Amounts may be rounded to whole dollars

RECEIVED BY  
LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

**NAME OF FILER**  
Public Safety Professionals United for a Safer Los Angeles County  
Opposing Gascon for District Attorney 2020 sponsored by Los Angeles  
Police Protective League

**AREA CODE/PHONE NUMBER** (916) 442-2952

**I.D. NUMBER (if applicable)** 1421772

**STREET ADDRESS**

**CITY** Los Angeles **STATE** CA **ZIP CODE** 90017

**Date of This Filing** 01/30/2020

**Report No.** 30997

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 1

**Date Stamp** 2020 JAN 30 AM 11:12

**PROPOSITION B UNIT**

**CALIFORNIA FORM 497**

For Official Use Only

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
01/29/2020	Los Angeles School Police Association PAC Sponsored by the Los Angeles School Police Association  Inglewood, CA 90301 Committee ID # 950225	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		4,700.00  <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