

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2020 SEP 28 AM 8:20
PROPOSITION B UNIT

497 CONTRIBUTION REPORT

NAME OF FILER CA Justice & Public Safety: Committee to Support George Gascón for Los Angeles District Attorney 2020		Date of This Filing 09/24/2020	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 804-573-9670	I.D. NUMBER (if applicable) 1402586	Report No. 636	
STREET ADDRESS 		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Los Angeles, CA 90067	STATE	ZIP CODE	

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
2020-09-23	Run, George, Run: George Gascon for LA DA 2020 Sacramento, CA 95815 ID: 1421300	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000,000.00 <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

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STREET ADDRESS _____		No. of Pages 2		
CITY Los Angeles, CA 90067	STATE	ZIP CODE		

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)

Reason for Amendment: _____