

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

RECEIVED BY LOS ANGELES COUNTY 496 INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> WORKING FAMILIES FOR HOLLY MITCHELL FOR COUNTY SUPERVISOR 2020, SPONSORED BY LA VOICE ACTION		<b>Date of This Filing</b> <u>11/01/2020</u>	RECEIVED BY <b>LOS ANGELES COUNTY</b> Date Stamp <b>2020 NOV -2 AM 8:44</b> <b>PROPOSITION B UNIT</b>	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (213) 624-6200	<b>I.D. NUMBER (if applicable)</b> 1421304	<b>Report No.</b> <u>11012020</u>		
<b>STREET ADDRESS</b> _____		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> LOS ANGELES	<b>STATE</b> CA	<b>ZIP CODE</b> 90071		<b>No. of Pages</b> <u>2</u>

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b>				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
HOLLY J. MITCHELL							
<b>OFFICE SOUGHT OR HELD</b>	<b>DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>
County Supervisor LOS ANGELES COUNTY, #2		X					

## 2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/31/2020	TELEPHONE CALLS Cumulative to date total \$615387.59	4,066.30

Reason for Amendment: \_\_\_\_\_

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**CALIFORNIA FORM 496**  
 I.D. NUMBER (If applicable)  
 1421304

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 WORKING FAMILIES FOR HOLLY MITCHELL FOR COUNTY SUPERVISOR 2020, SPONSORED BY LA VOICE ACTION

### 3. Contributions of \$100 or More 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	INTEREST RATES
10/30/2020	PLANNED PARENTHOOD ADVOCATES PASADENA AND SAN GABRIEL VALLEY PAC  ALTADENA, CA 91001 Committee ID# 1414985	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		4,000.00	If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

**\*\*Contributor Codes**  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee