

497 Contribution Report

Amounts may be rounded to whole dollars.

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NAME OF FILER Janice Hahn for Supervisor 2024		Date of This Filing 12/28/2023	2023 DEC 29 AM 9:09 PROPOSITION B UNIT	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1457362	Report No. 122823B		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below) No. of Pages 1		
CITY Los Angeles	STATE CA		ZIP CODE 90017	

1. Contributions 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
12/26/2023	John Babbitt Scottsdale, AZ 85262-2933	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Managing Partner California Sulphur Co.	\$1,000.00 <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