497 (Contri	bution	Report
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Amounts may be rounded to whole dollars.

NAME OF FILER Chris Holden for Supervisor 2024			Date of This Filing 01	/10/24 LO		CALIFORNIA 497	
AREA CODE/PHONE NUMBER (if applicable) 626-864-5255 1458291		Report No. 20			For Official Use Only		
STREET ADDRESS			Amendmen to Report No.	t P	ROPOSITION B UNIT		
Pasadena	ena STATE ZIP CODE CA 91105			1 of 4			
1. Contribution	(s) Received						
DATE RECEIVED	FULL NA	ME, STREET ADDRESS AND ZIP CODE OF CON (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) RECE			
01/09/24	Sunset International Management Marina Del Rey, CA 90292			IND COM OTH PTY SCC		1500. Check if Loan Provide interest rate	
01/09/24	Mike McGuire for Insurance Commissioner 2026 ID 1456532 Oakland, CA 94607			IND COM OTH PTY SCC		1500.00 Check if Loan Provide interest rate	
01/09/24	Blake Anderson Batavia, IL 60510			IND COM OTH PTY SCC	Retired / None	1500,00 Check if Loan Provide interest rate	
Reason for Amend	lment:				* Contributor Codes IND - Individual COM - Recipient Committee (c OTH - Other (e.g., business er PTY - Political Party SCC - Small Contributor Committee	ntity)	

497 Contrib	ution Report		Amoun	ts may be rounded to	whole dollars.	RECEIVED		
NAME OF FILER Chris Holden for Supervisor 2024				Date of This Filing 01/10/24 2024		NGEL ED COUNTY	CALIFORNIA 497	
AREA CODE/PHONE NUMBER (if applicable) 626-864-5255 1458291			Report No. 20	024-01-10-01	WII AM 9: 16		Official Use Only	
STREET ADDRESS			Amendmer to Report No.	nt	NII AM 9: 16 SITION B UNIT			
CITY Pasadena		STATE CA	ZIP CODE 91105	(explain below) No. of Pages	2 of 4			
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 E (IF SELF-EMPLOYED, ENTER NAME	UPATION AND EMPLOYER AMOUNT		
01/04/24	William Discepolo Sierra Madre, CA 91024			IND COM OTH PTY SCC	Group		1500.00 Check if Loan ** Provide interest rate	
01/04/24	Carol Liu La Canada, CA 91011			IND COM OTH PTY SCC	Ch		1500.00 Check if Loan Provide interest rate	
01/04/24	Mohammed Khan Orange, CA 92869			IND COM OTH PTY SCC	□ Check		1500.00 Check if Loan Provide interest rate	
Reason for Amend	lment:					* Contributor Codes IND - Individual COM - Recipient Comr OTH - Other (e.g., bus PTY - Political Party SCC - Small Contribut	siness entity)

497 Contrib	ution Report		Amount	its may be rounded to	whole dollars. RE	CEIVEDRY		
NAME OF FILER Chris Holden for Supervisor 2024				01/10/24 US AN	GELES Dete Stamp Y	CALIFORNIA 497		
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)		2	2024-01-10-014 JA	N 11 AM 9: 16	For	Official Use Only		
626-864-5255		1458291		Report No.	DDODG			Omoia, coo o.i.,
STREET ADDRESS			Amendment to Report No.	114	SITION B UNIT			
CITY		STATE	ZIP CODE	(explain below)	3 of 4			
Pasadena		CA	91105	3014				
1. Contribution	(s) Received							
DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR				CONTRIBUTOR			AMOUNT	
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)				CODE*	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		RECEIVED
01/04/24	Abid Hussain Hemet, CA 92544				IND COM OTH PTY SCC	Physician / Abid Hussain		1000.00 Check if Loan Provide interest rate
01/04/24	Fred Zullo Canyon Country, CA91386			IND COM OTH PTY SCC	Not Employed / None		1000.00 Check if Loan Provide interest rate	
01/04/24	Syed Ali Whittier, CA 90605			IND COM OTH PTY SCC			1500.00 Check if Loan Provide interest rate	
Reason for Amend	Iment:					* Contributor Codes IND - Individual COM - Recipient Comr OTH - Other (e.g., bus PTY - Political Party SCC - Small Contribut	siness entity))

497 Contrib	ution Report	Am	lounts may be rounded to	whole dollars.	RECEIVED DY		
NAME OF FILER Chris Holden for Supervisor 2024			Date of This Filing	1/10/24 L	The second liverage of	ORNIA 497	
AREA CODE/PHONE NUMBER I.D. NUMBER (<i>if applicable</i>) 626-864-5255 1458291		Report No. 2	024-01-10-01	2024 JAN 11 AM 9: 16 For	Official Use Only		
STREET ADDRESS			Amendmer to Report No.	nt	PROPOSITION B UNIT		
CITY Pasadena		STATE ZIP CODE CA 91105	(explain below) No. of Pages	4 of 4			
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	
01/04/24	Sattar Mir Bellflower, CA 9267	0		IND COM OTH PTY SCC	Consultant / Sattar Mir	1500. 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	
Reason for Ameno	lment:				* Contributor Codes IND - Individual COM - Recipient Committee (othe OTH - Other (e.g., business entity PTY - Political Party SCC - Small Contributor Committee)	