

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY **EM**  
 JAN 26 2024  
 LOS ANGELES COUNTY  
 2024 JAN 26 PM 1:55  
 PROPOSITION B UNIT

**CALIFORNIA FORM 497**  
 For Official Use Only

NAME OF FILER Hatami for District Attorney 2024		Date of This Filing 1/26/2024
AREA CODE/PHONE NUMBER (949) 441-5352	I.D. NUMBER (if applicable) 1458513	Report No. 240126
STREET ADDRESS c/o Beaver Legal Corp		<input type="checkbox"/> Amendment to Report No. (explain below)
CITY Irvine	STATE CA	ZIP CODE 92612
		No. of Pages 1

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
01/25/2024	Shane Hensinger  Fairfax, CA 94930-1962	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Risk Analyst Audentes Consulting	\$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