497 Contrib	ution Report	Amoun	ts may be rounded to v	whole dollars.	RECEIVED BY FEB 1 2 2024	CONTRIBUTION REPORT
NAME OF FILER John McKinney	for LA District Atto	orney 2024	Date of This Filing 02/12/2024		CALIF	ORNIA 497
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1458551			Danast No. 02/11/2024		ROPOSITION B UNIT	or Official Use Only
STREET ADDRESS			Amendment to Report No.			
CITY		STATE ZIP CODE CA 91436	(explain below) No. of Pages	s 1		
1. Contributi	on(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
02/09/2024	Catherine Bowen Woodland Hills, CA 91364			IND COM OTH PTY SCC	Mother Self	1,000.00 Check if Loan % Provide interest rate
02/11/2024	Stacey Kohl Santa Monica, CA 90402				Retired Retired	1,000.00
02/11/2024	Don Monroe Los Angeles, CA 9	0016		IND COM OTH PTY SCC	Ceo Cnm Metals Inc	5,000.00 Check if Loan ** Provide interest rate
Reason for Amer	ndment:				*Contributor Codes IND – Individual COM – Recipient Committee (o OTH – Other (e.g., business el PTY – Political Party SCC – Small Contributor Comm	ntity)