

497 Contribution Report

Amounts may be rounded to whole dollars.

**RECEIVED BY**  
**LOS ANGELES COUNTY**  
 2024 MAR -5 AM 11:16  
 PROPOSITION B UNIT

**CALIFORNIA FORM 497**  
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<b>NAME OF FILER</b> Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hahn Ballot Measure Committee		<b>Date of This Filing</b> 3/4/2024
<b>AREA CODE/PHONE NUMBER</b> (213) 452-6565	<b>I.D. NUMBER (if applicable)</b> 1399573	<b>Report No.</b> 022824A
<b>STREET ADDRESS</b>		<input type="checkbox"/> Amendment to Report No. (explain below)
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90017
		<b>No. of Pages</b> 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
02/27/2024	L.A. County Probation Officers Union AFSCME, Local 685 PAC  Vernon, CA 90058-3914 ID: 744558	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,000.00 <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