

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY SEP 17 2024 EM

NAME OF FILER Neighbors For Affordable Housing and Homelessness Solutions Now		Date of This Filing <u>9/17/2024</u>	RECEIVED BY SEP 17 2024 EM LOS ANGELES COUNTY CALIFORNIA FORM 497 2024 SEP 18 AM 10:24 PROPOSITION B UNIT For Official Use Only
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1464755	Report No. <u>091724A</u>	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)	
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
09/16/2024	Lindsey Horvath Ballot Measure Committee of Accountability and Progress Encino, CA 91436-1856 ID: 1463038	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100,000. <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