

# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY  
LOS ANGELES COUNTY  
Date Stamp  
SEP 27 2024 EM  
497 CONTRIBUTION REPORT  
2024 SEP 27 PM 2:08  
PROPOSITION B UNIT

NAME OF FILER Angelenos for Hochman for DA 2024			Date of This Filing 09/27/2024	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (916) 442-7757	I.D. NUMBER (if applicable) 1474224		Report No. 330501-10	
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Sacramento	STATE CA	ZIP CODE 95814	No. of Pages 1	

## 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
09/26/2024	California Business Properties Association PAC Sacramento, CA 95814 Committee ID # 850288	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

\*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

Reason for Amendment: \_\_\_\_\_