

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

RECEIVED BY OCT 02 2024 EM

LOS ANGELES COUNTY 496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER WORKING FAMILIES FOR SAFE NEIGHBORHOODS AND GEORGE GASCON FOR DISTRICT ATTORNEY 2024, SPONSORED BY LA VOICE ACTION			Date of This Filing <u>10/02/2024</u>	Date Stamp OCT -3 AM 9:16	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (213) 624-6200	I.D. NUMBER (if applicable) 1475464		Report No. <u>10022024 IE</u>		
STREET ADDRESS _____			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY LOS ANGELES	STATE CA	ZIP CODE 90071	No. of Pages <u>3</u>		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED GEORGE GASCON				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD District Attorney LOS ANGELES COUNTY	DISTRICT NO.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/01/2024	TELEPHONE CALLS (ESTIMATE) Cumulative to date total \$62253.95	32,800.00
10/01/2024	TELEPHONE CALLS FOR THE PERIOD 10/1/24-10/10/24 (ESTIMATE) Cumulative to date total \$62253.95	15,000.00
10/01/2024	CONSULTING Cumulative to date total \$62253.95	12,000.00
10/01/2024	VOTER FILE Cumulative to date total \$62253.95	500.00

Reason for Amendment: _____

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

OCT 02 2024 EM
496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER WORKING FAMILIES FOR SAFE NEIGHBORHOODS AND GEORGE GASCON FOR DISTRICT ATTORNEY 2024, SPONSORED BY LA VOICE ACTION		Date of This Filing <u>10/02/2024</u>	Date Stamp	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (213) 624-6200	I.D. NUMBER (if applicable) 1475464	Report No. <u>10022024IE</u>		
STREET ADDRESS _____		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY LOS ANGELES	STATE CA	ZIP CODE 90071	No. of Pages <u>3</u>	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED GEORGE GASCON				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED _____			
OFFICE SOUGHT OR HELD District Attorney LOS ANGELES COUNTY	DISTRICT NO.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/01/2024	VOTER FILE Cumulative to date total \$62253.95	1,953.95

Reason for Amendment: _____

496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

CALIFORNIA FORM 496

NAME OF FILER
 WORKING FAMILIES FOR SAFE NEIGHBORHOODS AND GEORGE GASCON FOR DISTRICT ATTORNEY 2024, SPONSORED BY LA VOICE ACTION

I.D. NUMBER (if applicable)
 1475464

3. Contributions of \$100 or More 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	INTEREST RATES
09/25/2024	PROGRESSIVE ERA PAC SAN FRANCISCO, CA 94104 Committee ID# 1449477	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		105,000.00	If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

****Contributor Codes**
 IND – Individual
 COM – Recipient Committee (other than PTY or SCC)
 OTH – Other
 PTY – Political Party
 SCC – Small Contributor Committee