

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

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PROPOSITION B UNIT
OCT 08 2024 EM

CALIFORNIA FORM 496
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NAME OF FILER
California Working Families Party

AREA CODE/PHONE NUMBER
917-336-0422

I.D. NUMBER (if applicable)
1438874

STREET ADDRESS

CITY STATE ZIP CODE
Brooklyn NY 11201

Date of This Filing 10/08/2024

Report No. 2024-1008-6

Amendment to Report No. _____ (explain below)

No. of Pages 1

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
George Gascon							
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
District Attorney		X					

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/08/2024	Printed literature	\$676.30

Reason for Amendment _____