

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES COUNTY
496 INDEPENDENT EXPENDITURE REPORT

| | | | | | |
|---|---|------------------------------------|--|--|---|
| NAME OF FILER Angelenos for Hochman for DA 2024 | | | Date of This Filing <u>10/18/2024</u> | Date Stamp 2024 OCT 18 PM 2: 4 | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER (916) 442-7757 | I.D. NUMBER (if applicable) 1474224 | Report No. <u>330501-09</u> | PROPOSITION B UNIT OCT 18 2024 <i>EM</i> | | |
| STREET ADDRESS _____ | | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Sacramento | STATE CA | ZIP CODE 95814 | No. of Pages <u>2</u> | | |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|---|---------------------|---------------------|---------------|---|---------------------|----------------|---------------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Nathan Hochman | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED _____ | | | |
| OFFICE SOUGHT OR HELD District Attorney County of Los Angeles | 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 |
|------------|---|-----------|
| 10/18/2024 | LIT, POS Cumulative to date total \$1462385.60 | 80,470.58 |
| | | |
| | | |
| | | |
| | | |

Reason for Amendment: _____

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CALIFORNIA
FORM **496**

NAME OF FILER
Angelenos for Hochman for DA 2024

I.D. NUMBER (If applicable)
1474224

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 |
|---------------|---|---|---|-----------------|---|
| 10/18/2024 | Christopher Hoffman Santa Monica, CA 90401 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Managing Director Eastdil Secured LLC | 5,000.00 | 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