

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY

496 INDEPENDENT EXPENDITURE REPORT

|  |   |  |   |   |
|--|---|--|---|---|
| <b>NAME OF FILER</b><br>WORKING FAMILIES FOR SAFE NEIGHBORHOODS AND GEORGE GASCON FOR DISTRICT ATTORNEY 2024, SPONSORED BY LA VOICE ACTION |   | <b>Date of This Filing</b> <u>10/18/2024</u>                                     | Date Stamp<br>2024 OCT 18 PM 3:59<br>PROPOSITION B UNIT<br>OCT 18 2024 EM | <b>CALIFORNIA FORM 496</b><br>For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br>(213) 624-6200  | <b>I.D. NUMBER (if applicable)</b><br>1475464 | <b>Report No.</b> <u>10182024IE</u>  |   |   |
| <b>STREET ADDRESS</b><br>_____<br>_____  |   | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |   |   |
| <b>CITY</b><br>LOS ANGELES   | <b>STATE</b><br>CA                            | <b>ZIP CODE</b><br>90071   | <b>No. of Pages</b> <u>2</u>  |   |

## 1. List Only One Candidate or Ballot Measure

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

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

| DATE       | DESCRIPTION OF EXPENDITURE                         | AMOUNT   |
|------------|--|----------|
| 10/17/2024 | VOTER FILE<br>Cumulative to date total \$201424.46 | 1,000.00 |
|            |  |          |
|            |  |          |
|            |  |          |
|            |  |          |

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

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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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE **   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | INTEREST RATES                                 |
|---------------|---|---|---|-----------------|--|
| 10/17/2024    | PROGRESSIVE ERA PAC<br>SAN FRANCISCO, CA 94104<br>Committee ID# 1449477                         | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 55,000.00       | If loan, enter interest rate, if any<br>_____% |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan, enter interest rate, if any<br>_____% |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan, enter interest rate, if any<br>_____% |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan, enter interest rate, if any<br>_____% |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan, enter interest rate, if any<br>_____% |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan, enter interest rate, if any<br>_____% |

\*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