

497 Contribution Report

Amounts may be rounded to whole dollars.

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FORM 497
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NAME OF FILER Gascon for LA District Attorney 2024		Date of This Filing 9/23/2024
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1457094	Report No. 092324A
STREET ADDRESS		<input checked="" type="checkbox"/> Amendment to Report No. 1 (explain below)
CITY Los Angeles	STATE CA	ZIP CODE 90026
		No. of Pages 2

1. Contributions 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
09/22/2024	Agnes Fund New York, NY 10021-4254	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Not-Employed N/A	\$2,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/22/2024	Loraine Lundquist Northridge, CA 91343-1716	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher CSUN	\$1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/21/2024	Babak Yousefzadeh San Francisco, CA 94111-4158	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Sheppard Mullin	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: Amend contributions received.

*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

Notes and Memos

FORM/SCHEDULE	REFERENCE NUMBER (IF APPLICABLE)	TEXT
F497P1	14395947	Refunded in subsequent period.