

624

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY

497 CONTRIBUTION REPORT

NAME OF FILER MICHAEL VAN KONYNENBURG		Date of This Filing 10/02/2024	RECEIVED BY LOS ANGELES COUNTY 2024 OCT -2 PM 4:56 CAMPAIGN FINANCE	CALIFORNIA FORM 497 For Official Use Only M15558
AREA CODE/PHONE NUMBER (213) 624-6200	I.D. NUMBER (if applicable)	Report No. 10022024		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY SANTA MONICA	STATE CA	ZIP CODE 90401	No. of Pages 1	

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/01/2024	ANGELLENOS FOR HOCHMAN FOR DA 2024 (ID# 1474224) SACRAMENTO, CA 95814	NATHAN HOCHMAN (IE COMMITTEE) District Attorney LOS ANGELES COUNTY	25,000.00	11/05/2024

Reason for Amendment: _____