

497 Contribution Report

Amounts may be rounded to whole dollars.

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|---|--|------------------|---|--|---|
| NAME OF FILER Elect Kathy MacLaren Palmdale Water District, Div 4 2024 | | | Date of This Filing 10/12/2024 | RECEIVED BY LOS ANGELES COUNTY 2024 OCT 15 AM 9:39 CAMPAIGN FINANCE | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER 661-435-9973 | I.D. NUMBER (if applicable) 1340088 | | Report No. 5 | | |
| STREET ADDRESS | | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Palmdale | STATE CA | ZIP CODE 3550 | No. of Pages 1 | | |

1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE* | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED |
|---------------|--|---|--|---|
| 10/11/2024 | Laborers' Local 300 Small Contributor Committee, ID 950674 Los Angeles, CA 90006 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2500 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |

Reason for Amendment: _____

* 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