

**497 Contribution Report**

Amounts may be rounded to whole dollars.

RECEIVED BY  
LOS ANGELES COUNTY  
Date Stamp  
2024 AUG 19 AM 10:07  
CAMPAIGN FINANCE

CALIFORNIA  
FORM **497**  
For Official Use Only

<b>NAME OF FILER</b> EXPERTS UNITED FOR HOMELESSNESS AND HOUSING SOLUTIONS A COALITION OF NONPROFIT ORGANIZATIONS AND HOUSING ADVOCATES		
<b>AREA CODE/PHONE NUMBER</b> (213) 452-6565	<b>I.D. NUMBER (if applicable)</b> 1463510	
<b>STREET ADDRESS</b>		
<b>CITY</b> Los Angeles	<b>STATE</b> CA	<b>ZIP CODE</b> 90017

<b>Date of This Filing</b>	8/16/2024
<b>Report No.</b>	081624A
<input type="checkbox"/> <b>Amendment to Report No.</b> (explain below)	
<b>No. of Pages</b>	1

**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
08/15/2024	Union Station Homeless Services Pasadena, CA 91104-4554	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,000.00 <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