

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Yes on SOS for Palos Verdes Schools		<b>Date of This Filing</b> 09/11/2024	<b>Date Stamp</b>	<div style="border: 2px solid black; padding: 5px; color: red; font-weight: bold;">             E-Filed 09/11/2024 14:38:13  Filing ID: 212073454           </div>	<b>CALIFORNIA FORM 497</b>
<b>AREA CODE/PHONE NUMBER</b> (310)210-7055	<b>I.D. NUMBER (if applicable)</b> 1473731	<b>Report No.</b> 24-3			For Official Use Only
<b>STREET ADDRESS</b>		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ <small>(explain below)</small>			
<b>CITY</b> Palos Verdes Estates	<b>STATE</b> CA	<b>ZIP CODE</b> 90274	<b>No. of Pages</b> 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
09/11/2024	South Bay United Teachers Issues PAC Torrance, CA 90503 Committee ID # 1319419	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00  <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

\*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

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