## **497 Contribution Report**

## Amounts may be rounded to whole dollars.

							497 CC	NTRIBUTION REPORT
NAME OF FILER  Yes on Measure AC				Date of		Date Stamp	CALIFORNIA 497 FOR Official Use Only	
				This Filing	10/15/2024			
AREA CODE/PHONE NUMBER (562)590-5550		I.D. NUMBER (if applicable) 1472477		Report No. 101524-1		E-Filed 10/15/2024 16:29:25		
STREET ADDRESS			☐ Amendment to Report No		Filing ID: 212312980			
CITY	TY STATE ZIP CODE			(explain below)				
Long Beach		CA 90802			1			
1. Contributi	on(s) 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
10/10/2024	LPA , Inc. Irvine, CA 92617			☐ IND ☐ COM			10,000.00	
					▼ OTH □ PTY		☐ Check if Loan	
					□ scc			Provide interest rate
10/15/2024	Los Angeles/Orange PAC Los Angeles, CA 90 Committee ID # 8220	0026	g and Constructio	on Trades Council	☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC			30,000.00  Check if Loan  **  Provide interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan
Reason for Amer	dment:					*Contributor Codes IND – Individual COM – Recipient Col OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	ousiness ent	ty)

FPPC Form 497 (Feb/2019) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov