497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

							437 001	VI RIBUTION REPORT
NAME OF FILER Vote Local Committee				Date of	00/10/0004	Date Stamp	CALIFO	
				This Filing	09/19/2024		FORM 431	
(213)489-4792 1473		I.D. NUMBER (if applicable	D. NUMBER (if applicable)			E-Filed	For Official Use Only	
		1473725		Keport No		09/19/2024 12:49:12		
STREET ADDRESS				☐ Amendmento Report No.	nt	Filing ID: 212117158		
CITY	STATE ZIP CODE		ZIP CODE	(explain below)				
Norwalk		CA	90650	No. of Pages	1			
1. Contribution	(s) Received						•	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
	Pamela Kirby Kuna, ID 83634				X IND	Retired None		2,500.00
					☐ COM ☐ OTH ☐ PTY			☐ Check if Loan
					□ scc			Provide interest rate
					☐ IND ☐ COM			
					OTH PTY			☐ Check if Loan
					□ scc			Provide interest rate
					☐ IND ☐ COM ☐ OTH			☐ Check if Loan
					☐ PTY ☐ SCC			% Provide interest rate
						*Contributor Codes		
Reason for Amendm				IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY – Political Party SCC – Small Contributor Committee				