

# 497 Contribution Report

Amounts may be rounded to whole dollars.

*(email)* 09/24/2024  
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 LOS ANGELES COUNTY  
 497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> PATRICIA GLASER		<b>Date of This Filing</b> 09/24/2024	<b>Date Stamp</b> 2024 SEP 25 PM 1	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (310) 282-6217	<b>I.D. NUMBER (if applicable)</b> 493156	<b>Report No.</b> 924-PGL-01	<b>CAMPAIGN FINANCE</b>	
<b>STREET ADDRESS</b>		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> LOS ANGELES	<b>STATE</b> CA	<b>ZIP CODE</b> 90067	<b>No. of Pages</b> 1	

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
09/23/2024	YES ON G - COMMUNITIES UNITED ACTION FUND (ID# 1474811) WASHINGTON, DC 20003	MEASURE G COUNTY OF LOS ANGELES	1,000.00	11/05/2024

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