Major Donor and Independent Expenditure Committee Campaign Statement

Date Stamp 461 PH 2: 15 Statement covers period Date of election if applicable: Page 1 of (Month, Day, Year) 01/01/2024 from EIKANGE For Official Use Only SEE INSTRUCTIONS ON REVERSE through 12/31/2024 3. Summary 1. Name and Address of Filer NAME OF FILER (Amounts may be rounded to whole dollars.) SAJE, Inc. Expenditures and contributions (including loans) of \$100 or more \$15,000.00 made this period. (Part 5.)_ RESIDENTIAL OR MAILING ADDRESS (NO. AND STREET) 2. Unitemized expenditures and contributions (including loans) under \$0.00 CITY STATE ZIP CODE \$100 made this period___ Los Angeles 90007 3. Total expenditures and contributions SUBTOTAL \$15,000.00 made this period. (Add Lines 1 + 2). RESPONSIBLE OFFICER AREA CODE/DAYTIME PHONE (If filer is other than an individual) 4. Total expenditures and contributions Cynthia Strathmann (213) 745-9961 made from prior statement, (Enter amount from Line 5 of last statement 2. Nature and Interests of Filer (Complete each applicable section.) filed. If this is the first statement for \$0.00 the calendar year, enter zero.)_ A FILER WHO IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS. 5. Total expenditures and contributions NAME OF EMPLOYER/BUSINESS **BUSINESS INTERESTS** (including loans) made since January 1 of the current calendar year. (Add TOTAL \$15,000.00 lines 3 + 4)_ ADDRESS OF EMPLOYER/BUSINESS A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS 4. Verification LENGAGED I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS the laws of the State of California that the foregoing is true and correct. Executed on 15 JAN 2025 BV A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY SIGNATURE OF INDIVIDUAL DONOR OR RESPONSIBLE OFFICER, IF OTHER THAN AN INDIVIDUAL Charitable Organization Amendment (Explain) FPPC Form 461 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

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 Amounts may be rounded to whole dollars.

 Statement covers period from
 1/1/2024
 CALIFORNIA FORM
 461

 through
 12/31/2024
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER SAJE, Inc.

Contributions (Including Loans, Forgiveness of Loans, and Loan	Guarantees) and Expenditures	Made
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(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF PAYEE (IF COMMITEE, ALSO ENTER ID NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURSIDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATED TO THIS CANDIDATE, MEASURE, OR COMMITTEE
10/08/2024	Experts United For Homelessness and Housing Solutions a Coalition of Nonprofit Organizations and Housing Advocates	Monetary Contribution Loan Non-Monetary Contribution		Measure A County of Los Angeles NO: A	\$15,000. 00	\$15,000.00
	Los Angeles, CA 90017-5864 ID: 1464755	Independent Expenditure		Support Oppose	1	

SUBTOTAL \$15,000.00

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(If more space is needed, use additional copies of this page for continuation sheets.)

 Amounts may be rounded to whole dollars.

Statement covers period from 1/1/2024 CALIFORNIA FORM 461

through 12/31/2024 Page 2 of 2

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

SAJE, Inc.

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

DATE	NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF PAYEE (IF COMMITEE, ALSO ENTER ID NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURSIDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATED TO THIS CANDIDATE, MEASURE, OR COMMITTEE
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	Los Angeles, CA 90017-5864 ID: 1464755	Independent Expenditure		Support Oppose	1	

SUBTOTAL \$15

\$15,000.00

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