

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2024 APR -1 AM 9:30
3/29/24
CAMPAIGN FINANCE

CALIFORNIA FORM 497
For Official Use Only

NAME OF FILER L.A. County Firefighters Local 1014, IAFF Education Project			Date of This Filing 03/29/2024
AREA CODE/PHONE NUMBER (310) 639-1014	I.D. NUMBER (if applicable) 1279076		Report No. 365874-MX
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)
CITY El Monte	STATE CA	ZIP CODE 91731	No. of Pages 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)
03/29/2024	Firefighters and Neighbors for Safer Communities - Yes on Measure FD, Sponsored by LA County Fire Fighters, IAFF Local 1014 (ID# 1424050) Los Angeles, CA 90017	Los Angeles County Fire District, California, Measure FD, Parcel Tax Measure: FD	250,000.00	11/05/2024

Reason for Amendment: _____