

497 Contribution Report

Amounts may be rounded to whole dollars.

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NAME OF FILER LA Jobs PAC: Sponsored by the Los Angeles Area Chamber of Commerce			Date of This Filing 10/27/2022	LOS ANGELES COUNTY 2022 OCT 28 AM 9:11 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (213) 580-7521	I.D. NUMBER (if applicable) 990680		Report No. 10272022A		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY Los Angeles	STATE CA	ZIP CODE 90017	No. of Pages 2		

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)
10/26/2022	Bob Hertzberg for Supervisor 2022 Sacramento, CA 95815-4404 ID: 1443772	Bob Hertzberg County Supervisor County: Los Angeles	\$1,500.00	11/08/2022

Reason for Amendment _____

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LOS ANGELES COUNTY
Date Stamp
2022 OCT 28 AM 9:1

CALIFORNIA
FORM **497**
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CAMPAIGN FINANCE
DISCLOSURE SECTION

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1. Contributions 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
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Reason for Amendment: _____

*Contributor Codes
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee