497 Contribution	Report	leap up	Amounts ma	y be rounded to who	ole dollars.	I GO A MICE!	VED BY		•
NAME OF FILER Yes on Measure LA Committee for Quality Education and Student Success, Sponsored by Labor Organizations and Educators				Date of This Filing 10/19/2022 Report No. 101922B Amendment to Report No. (explain below)		Date S	AMII: 09	CALIFORNIA 107	
AREA CODE/PHONE NUMBER (if applicable) 1452899								For	Official Use Only
STREET ADDRESS 777 S. Figueroa Street Suite 4050						DISCLOSU	I FINANCE RE SECTION		
CITY Los Angeles		STATE ZIP CODE CA 90017		No. of Pages	2				
1. Contribution	ns Received								
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			JTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)			AMOUNT RECEIVED
10/18/2022	Local 12 PA 150 Corson		perating Eng	rineers	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				\$25,000.00 Check if Loan Provide interest rate
10/18/2022	Jacobs 1000 Wilshi Ste 2100 Los Angeles	re Blvd , CA 90017-24	17		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC				\$75,000.00 Check if Loan Provide interest rate
10/18/2022	106 S Mento Ste 200	rvices, Inc. r Ave A 91106-2931			☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC				\$20,000.00 Check if Loan Provide interest rate
Reason for Amendme	nt:		-			_	*Contributor Codes IND - Individual COM - Recipient Cor OTH - Other (e.g., bu PTY - Political Party SCC - Small Contribi	isiness entit	

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497 Contribution Report NAME OF FILER Yes on Measure LA Committee for Quality Education and Student Success, Spon by Labor Organizations and Educators				Amounts may be rounded to whole dollars.			RECEIVED BY			
				Date of This Filing	10/19/2022	2022 OCT 20	AMII: 09	FORM 497		
AREA CODE/PHONE NUMBER (if applicable) (213) 452-6565 1452899 STREET ADDRESS			able)	Report No.	101922B	CAMPAIGN	FINANCE	For Official Use Only		
				Amendmento Report No.		DISCLOSUR				
CITY Los Angeles		STATE ZIP CODE CA 90017		No. of Pages	2					
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)			AMOUNT RECEIVED	
10/18/2022	UA Journeyme	en & Apprenti 90248-4217	ces Local #2	50	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC				\$10,000.00 Check if Loan Provide interest rate	
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					*Contributor Codes IND - Individual COM - Recipient Cor OTH - Other (e.g., bu	ner than PTY or SCC)				

Reason for Amendment:

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PTY - Political Party

SCC - Small Contributor Committee