

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Community Safety Partnership Sponsored by ASSOCIATION FOR LOS ANGELES DEPUTY SHERIFFS		Date of This Filing <u>02/22/2024</u>	Date Stamp <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;"> E-Filed 02/22/2024 12:33:11 Filing ID: 210644010 </div>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (213) 489-4792	I.D. NUMBER (if applicable) 1445792	Report No. <u>1</u>		
STREET ADDRESS CITY STATE ZIP CODE MONTERREY PARK CA 91755		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
		No. of Pages <u>1</u>		

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION <small>(IF APPLICABLE)</small>
02/21/2024	Brenda Olmos for City Council 2024 (ID# 1417477) Paramount, CA 90623	Brenda Olmos City Council Member: Paramount	750.00	03/05/2024

Reason for Amendment: _____