

PE24

# 497 Contribution Report

Amounts may be rounded to whole dollars.

① 01/05/2024  
RECEIVED BY  
LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

Date Stamp  
**2024 JAN -5 PM 3:**

**CALIFORNIA FORM 497**

For Official Use Only

020525  
C11160

CAMPAIGN FINANCE

NAME OF FILER Re-Elect Erik Miller for School Board 2024		
AREA CODE/PHONE NUMBER (562) 712-6656	I.D. NUMBER (if applicable) 1416452	
STREET ADDRESS		
CITY Long Beach	STATE CA	ZIP CODE 90807

Date of This Filing 01/05/2024

Report No. 010524-1

Amendment to Report No. \_\_\_\_\_  
(explain below)

No. of Pages 1

## 1. Contribution(s) 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
01/05/2024	Mahoney Law Group Long Beach, CA 90802	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
01/05/2024	Doris Robinson Justin, CA 92780	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher LBUSD	1,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		  <input type="checkbox"/> Check if Loan _____% Provide interest rate

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