

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Katie Clark			Date of This Filing 09/19/2024		<div style="border: 1px solid black; padding: 5px; transform: rotate(-15deg);"> RECEIVED BY LOS ANGELES COUNTY 2024 SEP 20 AM 9:28 CAMPAIGN FINANCE </div>	<div style="background-color: black; color: white; padding: 10px; font-weight: bold;"> CALIFORNIA FORM 497 </div> <div style="background-color: black; color: white; padding: 5px; text-align: center;"> For Official Use Only </div>
AREA CODE/PHONE NUMBER (626) 219-6444	I.D. NUMBER (if applicable) 1475178		Report No. 1			
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)			
CITY Altadena	STATE CA	ZIP CODE 91001	No. of Pages _____			

## 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
09/19/2024	Planned Parenthood Advocates Pasadena and San Gabriel Valley PAC ID# 1414985  Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000  <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
		<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