

497 Contribution Report

Amounts may be rounded to whole dollars.

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NAME OF FILER Karson LP		Date of This Filing 10/21/2024	Date Stamp 2024 OCT 22 AM 10 CITY OF CULVER CITY CITY OF CULVER CITY	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable)	Report No. 1		
STREET ADDRESS [REDACTED]		☐ Amendment to Report No. _____ (explain below)		
CITY [REDACTED]	STATE [REDACTED]	ZIP CODE [REDACTED]		

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OR RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/18/2024	Our Culver City in Support of Al Vera and Denice Renteria for City Council 2024 FPPCID# 1476210 10736 Jefferson Blvd #1028 Culver City CA 90232	Al Vera, Denise Renteria City Council, Culver City	20,000.00	11/5/2024

Reason for Amendment: _____
