

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER BARBA FOR CITY COUNCIL 2024			Date of This Filing 10/29/2024 Report No. 102924 ☐ Amendment to Report No. (explain below) No. of Pages 1	Date Stamp E-Filed 10/29/2024 15:39:42 Filing ID: 212449138	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (310)817-6679	I.D. NUMBER (if applicable) 1466108				
STREET ADDRESS					
CITY Inglewood	STATE CA	ZIP CODE 90301			

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
10/29/2024	Abundant Housing LA PAC Oakland, CA 94607 Committee ID # 1442154	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		1,000.00 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		 ☐ Check if Loan _____% Provide interest rate

*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

Reason for Amendment: _____
