497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Steven Hernandez for Mayor 2024		Date of 8/29/24 This Filing		Date Stamp	CALIFORNIA 497	
AREA CODE/PHONE NUMBER STREET ADDRESS CITY	I.D. NUMBER (if applicable) STATE ZIP CODE	Report No Amendmento Report No. (explain below) No. of Pages	nt	RECEIVED AUG 2 9 2024		cial Use Only
1. Contribution(s) R	eceived			and AGARITY CONTRACTOR OF THE		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	OR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMF (IF SELF-EMPLOYED, ENTER NAME OF	PLOYER BUSINESS)	AMOUNT RECEIVED
8/28/24			☐ IND☐ COM☐ OTH☐ PTY SCC			,000 Check if Loan ** ** ** ** ** ** ** ** **
			☐ IND☐ COM☐ OTH☐ PTY☐ SCC			Check if Loan % Provide interest rate
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ 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		

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)