

# 497 Contribution Report

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

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CALIFORNIA FORM **497**  
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LOUIS ANGELES COUNTY  
2022 AUG 22 AM 8: 32  
CAMPAIGN FINANCE

NAME OF FILER Patrice Marshall McKenzie for Board of Education 2022			Date of This Filing <u>8/19/22</u>
AREA CODE/PHONE NUMBER 310-686-6441	I.D. NUMBER (if applicable) 1450349		Report No. <u>1</u>
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)
CITY Hawthorne	STATE CA	ZIP CODE 90250	No. of Pages <u>1</u>

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
8/19/22	George Mc Kenna III Los Angeles, CA 90008	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LA Unified School District School Board Member	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
		<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