

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER WILLIAMS-HUNTER FOR CITY COUNCIL 2024		Date of This Filing 10/30/2024	Date Stamp	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1471102	Report No. 103024		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	RECEIVED 2024 OCT 30 P 4:49	
CITY Inglewood	STATE CA	ZIP CODE 90301		No. of Pages 1

CITY CLERK DEPARTMENT

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER ID, NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/30/2024	Patterson for Mayor 2024 (ID# 1469098) [REDACTED] Inglewood, CA 90301	L. David Patterson Mayor City of Hawthorne	2,000.00	11/05/2024

Reason for Amendment: \_\_\_\_\_