Pase:007

	,				· · · · · · · · · · · · · · · · · · ·	497 CONTRIBUTION REPOR	
<b>NAME OF FILER</b> KATHRYN BARGEI	R FOR SUPERVISOR 2016	Date of   This Filing   10/26/2016		10/26/2016	Date Stamp C	CALIFORNIA 497	
I.D. NUMBER (If applicable)  1376396  TREET ADDRESS  STATE ZIP CODE		Report No. 10	0262016		For Official Use Only		
		☐ Amendment to Report No.					
			No. of Pages	7			
1. Contributi	ion(s) Received						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)			CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLO (IF SELF-EMPLOYED, ENTER NAME OF BUSI		
09/19/2016	WATT PAC, INC. (WA	TT DEVELOPERS LLC, LAKE MATHEWS AS	SSOCIATES LLC)	☐ IND ☐ COM 図 OTH		500.	
	CONTRIBUTION RECEIVED FR	ON WAIT PAC, INC.		☑ OTH ☐ PTY ☐ SCC		Check if Loan	
10/25/2016 WATT PAC, INC. (WATT DEVELOPERS LLC, LAKE MATHEWS			SSOCIATES LLC)	☐ IND☐ COM☐ OTH☐ PTY		1,500. ☐ Check if Loan	
	CONTRIBUTION RECEIVED FR	OM WATT PAC, INC.	а	□ scc		Provide interest rate	
				☐ IND☐ COM☐ OTH☐ PTY		☐ Check If Loan	
				scc		Provide Interest rate	
Reason for Amer	ndment:	•			*Contributor Codes IND – Individual COM – Reciplent Committ OTH – Other (e.g., busine PTY – Political Party SCC – Small Contributor C		

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KATHRYN BARGER FOR SUPERVISOR 2016				Date of This Filing _	10/26/2016		CALIF	
REA CODE/PHONE NUMB	R	I.D. NUMBER (if applicable	9) .			·		Official Use Only
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TREET ADDRESS				Amendme	ent			
CITY		STATE	ZIP CODE	(explain below)  No. of Pages	7			
1. Contribution(s	s) Received							
DATE RECEIVED	FULL NAME,	STREET ADDRESS AN	D ZIP CODE OF CONTR	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND E (IF SELF-EMPLOYED, ENTER NAME O		AMOUNT RECEIVED
10/25/2016 RE	D CHAMBER CO.				☐ IND			1,000.
					▼ OTH			☐ Check if Loan
					□ scc		•	Provide interest rate
10/25/2016 HIEU TAI TRAN				IND □ COM □ OTH	CHAIRMAN SAIGON NATIONAL BANK		1,000.	
			·-		☐ PTY ☐ SCC			Provide Interest rate
10/25/2016 VA	NIR CONSTRUCTION M	NAMEMENT, INC.			☐ IND			1,000.0
					☑ OTH ☐ PTY			☐ Check if Loan
	· · · · · · · · · · · · · · · · · · ·				SCC			Provide interest rate
						*Contributor Codes		
	•	·				IND – Individual COM – Recipient Co OTH – Other (e.g.,		er than PTY or SCC)

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			ts may be rounded to v			497 CONTRIBUTION REPOR	
<b>NAME OF FILER</b> KATHRYN BARGER F	OR SUPERVISOR 2016		Date of This Filing 10/26/2016		Date Stamp CA	CALIFORNIA 497	
AREA CODE/PHONE NUM	MBER	I.D. NUMBER (if applicable)	Report No. 1	0262016		For Official Use Only	
STREET ADDRESS		1376396	☐ Amendme				
CITY		STATE ZIP CODE	(explain below)  No. of Pages	7			
1. Contribution	n(s) Received						
DATE RECEIVED	FULL NAM	E, STREET ADDRESS AND ZIP CODE OF CONT (IF COMMITTEE, ALSO ENTER LD, NUMBER)	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYI (IF SELF-EMPLOYED, ENTER NAME OF BUSINE		
10/25/2016	STACEY MURPHY			IND COM OTH PTY SCC	BUSINESS DEVELOPMENT & SUPPO ISS WIRELESS	Check if Loan	
10/25/2016	NETWORK PARATRANSI	P SYSTEMS, INC.		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		1,000.0	
10/25/2016	JOHN QUINTANILLA			IND COM OTH PTY SCC	BOARD MEMBER ROSEMEAD SCHOOL DISTRICT	1,000.00	
Reason for Amendm	nent:				*Contributor Codes IND – Individual COM – Recipient Committe OTH – Other (e.g., busines PTY – Political Party SCC – Small Contributor Co	s entity)	

NAME OF FILER					Date Stamp	_	ONTRIBUTION REPORT
	R FOR SUPERVISOR 2	0016	Date of This Filing 10/26/2016		Date Stamp	CALIFORNIA 497	
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CITY		STATE ZIP CODE	(explain below)				
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1. Contributi	on(s) Received	1	·				
	-1			T	IF AN INDIVIDUAL,		
DATE RECEIVED	FULL	NAME, STREET ADDRESS AND ZIP CODE OF CONT (IF COMMITTEE, ALSO ENTER LD. NUMBER)	RIBUTOR	CONTRIBUTOR CODE *	ENTER OCCUPATION AND EMI	PLOYER BUSINESS)	AMOUNT RECEIVED
10/25/2016	SIGRID H. LOPEZ			IND	PUBLIC RELATIONS SIG, INC.		1,000.00
	<u>'</u>			СОМ			
				□ отн			☐ Check if Loan
				☐ PTY☐ SCC		•	%
							Provide interest rate
10/25/2016	EDIK MARDIROSSI	IAN		IND IND	Manager MTS		1,500.00
	ı			☐ COM			
		•		OTH			☐ Check if Loan
	-			☐ PTY   ☐ SCC			%
10/25/2016	TROUTE WARRENCE	20734			HOMEMAKER		Provide interest rate 1,500.00
10/25/2016	JASMIK MARDIROS	SSIAN		IX IND	HOMBMAKER .	,	1,500.00
				COM			,
				☐ OTH			☐ Check if Loan
				scc			%
			<del></del>				Provide interest rate
					*Contributor Codes		
					IND-Individual	•	
					COM - Recipient Com		
Daggar day Asses	. des e t.				OTH - Other (e.g., bu PTY - Political Party		
Reason for Amer	idment:		<del></del>		SCC – Small Contribut	or Committe	ее

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## Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER		Date of	Date Stamp	CALIFORNIA 407
KATHRYN BARGER FOR SUPERVISO	R 2016	This Filing 10/26/2016		CALIFORNIA 497
AREA CODE/PHONE NUMBER  1.D. NUMBER (if applicable)  1376396  STREET ADDRESS		Report No. 10262016		For Official Use Only
		Amendment to Report No.		
СІТУ	STATE ZIP CODE	(explain below)  No. of Pages <sup>7</sup>		

## 1. Contribution(s) Received

Reason for Amendment:

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
10/25/2016	MORRIS R. GOLDMAN	IND COM OTH PTY SCC	PRINCIPAL/OWNER URBAN SOLUTIONS LLC	1,500.00
10/25/2016	JB & ASSOCIATES, LLC	☐ IND ☐ COM 图 OTH ☐ PTY ☐ SCC		1,000.00
10/25/2016	PETROS KESHISHIAN .	IND COM OTH SCC	OWNER PEOPLE'S TAXI, INC.	1,000.00

\*Contributor Codes

IND-Individual

IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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	ution Report Amounts n	may be rounded to w	thole dollars.		497 CON	NTRIBUTION REPORT	
NAME OF FILER KATHRYN BARGER	R FOR SUPERVISOR 2016	Date of This Filing	10/26/2016	Date Stamp	CALIFOR	RNIA 107	
AREA CODE/PHONE		Jino				v	
,	1376396	Report No. 10	0262016		FOI U	fficial Use Only	
STREET ADDRESS		Amendme to Report No. (explain below)	ent ),				
CITY	STATE ZIP CODE .	No. of Pages	57				
1. Contributi	on(s) Received						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIE (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	BUTOR	CONTRIBUTOR CODE *		IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) RE		
10/25/2016	CALIFORNIA STATE LEGISLATIVE BOARD, UNITED TRANSPORTATION OF BY UTU PAC	TION UNION	☐ IND			1,500.00	
	Committee ID # 745910		□ отн □ рту			☐ Check if Loan	
			scc			Provide interest rate	
10/25/2016	WILLIAM CARRICK. JR.		IND COM OTH PTY SCC	CONSULTANT CARRICK CONSULTING		1,500.00  ☐ Check if Loan  ———————————————————————————————————	
10/25/2016	BONNIE GOLDMAN		▼ IND	COMMERCIAL SERVICES REPRESENTATIVE		Provide Interest rate 1,500.00	
				LOS ANGELES DEPARTMENT OF AND POWER	]	Check if Loan  % Provide Interest rate	
			<u></u>				
Reason for Amen	idment-			*Contributor Codes IND – Individual COM – Recipient Comm OTH – Other (e.g., bus) PTY – Political Party SCC – Small Contributor	iness entity)	,	

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497 Contrib	ution Report				RECEIVED BY S ANGELES COUNTY  16 OCTOBERSTAND CALL	
NAME OF FILER		Amounts	may be rounded to w	hole dollars.	116 OC Date Startip CALI	CONTRIBUTION REPORT
капнали нувака	FOR SUPERVISOR 201	6	This Filing	10/26/2016	MP OC ISSUED CALL	ORM 497
AREA CODE/PHONE		I.D. NUMBER (If applicable)	Report No. 10		TOURSE LIVE	or Official Use Only
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1. Contributi	on(s) Received					
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10/25/2016	IDA AGHAJANIAN	·		IND COM OTH PTY SCC	CONTROLLER SAN GABRIEL TRANSIT	1,000.00  Check if Loan  * Provide interest rate
10/25/2016	CAROL O. BIONDI			IND COM OTH PTY SCC	COMMISSIONER LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES	1,308.87  Check if Loan  ** Provide interest rate
10/25/2016	FRANK BIONDI			IND COM	INVESTMENT ADVISOR WATERVIEW ADVISORS, LLC	1,308.88
Reason for Amen	dment:			·	*Contributor Codes IND – Individual COM – Recipient Committee (o OTH – Other (e.g., business el PTY – Political Party SCC – Small Contributor Comm	ntity)

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