Page:001

ID:CAMPAIGN FINANCE

SCC - Small Contributor Committee

Reason for Amendment: _

ID:CAMPAIGN FINANCE

497 Contribution Report

Reason for Amendment: _

NAME OF FILER KATHRYN BARGER	FOR SUPERVISOR 2016		Date of This Filing _	10/31/2016	Date Stamp	CALIFC FOR	PRNIA 49
AREA CODE/PHONE NUMBER		I.D. NUMBER (if applicable) 1376396	Report No. 10			For Official Use Only	
STREET ADDRESS			Amendme to Report No.				
CITY		STATE ZIP CODE	No. of Pages	4	-		
1. Contributi	on(s) Received						
DATE RECEIVED	FULL NAM	E, STREET ADDRESS AND ZIP CODE OF CONTRIB (IF COMMITTEE, ALSO ENTER LD. NUMBER)	UTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYI (IF SELF-EMPLOYED, ENTER NAME OF BUSINE		AMOUNT RECEIVED
10/28/2016	THOMAS GIRARDI			X IND COM OTH PTY SCC	ATTORNEY GIRARDI & KESSE	-	1,50
10/28/2016	THOMAS GIRARDI	-		IND COM OTH PTY SCC	ATTORNEY GIRARDI & KESSE		1,50
10/28/2016	LATINO BUSINESS CH	AMBER OF GREATER LOS ANGELES, INC.		☐ IND☐ COM☐ OTH☐ PTY☐ SCC	-		1,50

Amounts may be rounded to whole dollars.

FPPC Form 497 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party

SCC - Small Contributor Committee

*Contributor Codes IND – Individual

Pase:003

ID:CAMPAIGN FINANCE

497 CONTRIBUTION REPORT

497 Contribution Report

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NAME OF FILER				Date of		Date S	tamp	CALIFO	
KATHRYN BARGER	FOR SUPERVISOR 2016			This Filing	10/31/2016			FOR	M T
AREA CODE/PHONE NUMBER 1.D. NUMBER (if applicable) 1376396			Report No. 10	312016			For	Official Use Only	
STREET ADDRESS				☐ Amendmer to Report No.					
CITY STATE ZIP CODE			(explain below) No. of Pages	4					
1. Contributi	on(s) Received		-						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			ITOR	CONTRIBUTOR CODE *	ENTER OCCU	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
10/28/2016	LATINO BUSINESS CHA	amber of greater :	LOS ANGELES, INC.		☐ IND☐ COM☐ OTH☐ PTY☐ SCC				500.00 Check if Loan ** Provide interest rate
10/28/2016	MARTIN OUTDOOR MED:	IA, LLC			☐ IND☐ COM☐ OTH☐ PTY☐ SCC				1,000.00
10/28/2016	MOTOROLA SOLUTIONS C00075341) Committee ID # 1380		CTION COMMITTEE (PEC	C ID NO.	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC				1,500.00 Check if Loan % Provide interest rate
Reason for Amer	ndment:					IND - I COM - OTH - PTY -	ibutor Codes ndividual - Recipient Com Other (e.g., bu Political Party Small Contribut	siness enti	

Amounts may be rounded to whole dollars.

Pase:004

NAME OF FILER KATHRYN BARGER FOR SUPERVISOR 2016 AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1376396 STREET ADDRESS			Date of	10/31/2016	Date Stamp	CALIFORNIA 497		
			Report No. 10312016 Amendment to Report No.		FOF		RIVI Official Use Only	
l. Contribution	on(s) Received							
DATE RECEIVED	FULL NAMI	STREET ADDRESS AND ZIP CODE OF CONTR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	RIBUTOR	CONTRIBUTOR ENTER OCCUPATION AND E CODE * (IF SELF-EMPLOYED, ENTER NAME)			AMOUNT RECEIVED	
10/29/2016	JOSEPH VALDES			X IND COM OTH PTY	VICE PRESIDENT PARKING COMPANY OF AMERI	CA	1,000.	
10/29/2016	YGRENE ENERGY FUND			□ scc			Provide interest rat	
				☐ IND☐ COM☐ OTH☐ PTY☐ SCC			☐ Check if Loan	
				IND COM OTH PTY SCC			Check if Loan	
					*Contributor Codes IND - Individual COM - Recipient Con OTH - Other (e.g., b	nmittee (oth	er than PTY or SCC)	