

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Wesson for Supervisor 2020		Date of This Filing 10/13/2020	RECEIVED BY LOS ANGELES COUNTY 2020 OCT 14 AM 8:15 PROPOSITION B UNIT	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1414475	Report No. 101320A		
STREET ADDRESS CITY Los Angeles STATE CA ZIP CODE 90017		<input type="checkbox"/> Amendment to Report No. (explain below) No. of Pages 1		

1. Contributions Received

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
10/12/2020	Alfred Abramian Phoenix, AZ 85033-5534	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Businessman Alfred Abramian	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/12/2020	Richard Ali Pacifica, CA 94044-1801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Entrepreneur Level 13 Inc	\$500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/12/2020	David Stone Los Angeles, CA 90004-1058	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager David Stone	\$1,000.00 <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

FPPC Form 497 (Jul/2016)
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