

# 497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY  
LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

NAME OF FILER KATHRYN BARGER FOR SUPERVISOR 2016		Date of This Filing 04/26/2016	Date Stamp 2016 APR 27 AM 7:4	CALIFORNIA FORM <b>497</b> For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1376396	Report No. 04262016B	CAMPAIGN FINANCE	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY	STATE	ZIP CODE	No. of Pages 3	

## 1. Contribution(s) 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
04/25/2016	THOMAS P. CACCIATORE	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY THOMAS P. CACCIATORE	1,250.00 <input type="checkbox"/> Check if Loan _____% Provide Interest rate
04/25/2016	ANNMARIE RITZ CARNEY	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HOMEMAKER	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide Interest rate
04/25/2016	D.J. GAUDI, INC.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <input type="checkbox"/> Check if Loan _____% Provide Interest rate

\*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

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

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497 CONTRIBUTION REPORT

NAME OF FILER KATHRYN BARGER FOR SUPERVISOR 2016		Date of This Filing 04/26/2016	2016 APR 27 AM 1:11 CAMPAIGN FINANCE	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1376396	Report No. 04262016B		
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04/25/2016	SUMMIT ENTERPRISES	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
03/23/2016	THE 'G' CREW	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
04/25/2016	THE 'G' CREW	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate

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

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NAME OF FILER KATHRYN BARGER FOR SUPERVISOR 2016		Date of This Filing 04/26/2016	Date Stamp 2016 APR 27 AM 7:42	CALIFORNIA FORM <b>497</b> For Official Use Only
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STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY	STATE	ZIP CODE	No. of Pages 3	

## 1. Contribution(s) Received

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04/25/2016	ROBERT A. VIRTUE	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE VIRCO MFG. CORPORATION	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
04/25/2016	PAUL ZEROUNIAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER PRIMO BURGERS	1,500.00 <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

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