Pase:001

ID: CAMPAIGN FINANCE

OCT-13-2016 05:19PM From:2134526575

497 Contribution	Report	Amounts n	nay be rounded to wh	ole dollars.	RECEIVE	EDBY		
NAME OF FILER Janice Hahn for Supervisor 2016			Date of This Filing 10/13/2016		IS ANUCIDAL		CALIFORNIA FORM 497	
AREA CODE/PHONE NUMBER  1,D. NUMBER (If applicable) 1376011			Report No.	101316	016 OCT 14	AM 9: 57	Fo	r Official Use Only
STREET ADDRESS			Amendme to Report No.		CAMPAIGN FINANCE			
CITY		STATE ZIP CODE	No. of Pages	3				
1. Contribution	ns Received						1	<del></del>
DATE RECEIVED	FULL NAME	BUTOR	CONTRIBUTOR CODE *	ENTER OCC	AN INDIVIDUAL, UPATION AND EMPLO ED, ENTER NAME OF B	AMOUNT RECEIVED		
10/12/2016	Advanced Dia	agnostic & Surgical Cent	er, Inc.	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC				\$3,000.00  Check if Loan  Provide interest rate
10/12/2016	Allied Pacif	Fic of California IPA		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC				\$3,000.00 Check if Loan Provide interest rate
10/12/2016	David Bohnet	t		☑ IND □COM □OTH □PTY □SCC	Investor Baroda Ve	ntures LLC		\$1,000.00 Check if Loan % Provide Interest rate
Reason for Amendmer	nt:				-	*Contributor Codes IND - Individual COM - Recipient Com OTH - Other (e.g., but PTY - Political Party	siness entity	)

T. Fift

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

Page: 002

ID: CAMPAIGN FINANCE

2016-10-13 17:05

497 Contribution	Report		Amounts ma	y be rounded to who	de dollars.	RECEIVED BY		
NAME OF FILER Janice Hahn for Supervisor 2016				Date of	10/13/2016	2016 OCT 14 AM 9: 57	CALIFOR	7111/
AREA CODE/PHONE NUMBER   I.D. NUMBER (if applicable)   1376011			Report No.	101316			fficial Use Only	
STREET ADDRESS				Amendme to Report No.	nt	CAMPAIGN FINANCE		
TTY STATE ZIP CODE			ZIP CODE	No. of Pages	3			
1. Contribution	ns Received				***	<u> </u>		
DATE RECEIVED	FULL NAM	E, STREET ADDRESS AND (IF COMMITTEE, ALSO EN		TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOY (IF SELF-EMPLOYED, ENTER NAME OF B		AMOUNT RECEIVED
10/12/2016	Ernest M. Ca	amacho			☑ IND □COM □OTH □PTY □SCC	President Pacifica Services		\$1,000.00 Check if Loan Provide interest rate
10/12/2016	Concourse D	iagnostic Sur	gery Center,	LLC	☐ IND ☐ COM ☐ PTY ☐ SCC	9		\$3,000.00 Check if Loan Provide interest rate
10/12/2016	Jimmy Blackr	man & Associa	tes, Inc.		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC			\$2,000.00 Check if Loan % Provide interest rate
Reason for Amendmer	nt:					*Contributor Codes IND - Individual COM - Recipient Com OTH - Other (e.g., bus PTY - Political Party SCC - Small Contribut	iness entity)	nan PTY or SCC)

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

Page: 003

ID: CAMPAIGN FINANCE

OCT-13-2016 05:19PM From:2134526575

497 Contribution	Report	Amoun	nts may be rounded to wh	ole dollars.	RECEIVED BY	
NAME OF FILER Janice Hahn for Supervisor 2016			Date of This Filing _	10/13/2016	03 AN COMESTING COUNTY	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable) 1376011			Report No.	101316	2016 OCT 14 AM 9:57	For Official Use Only
STREET ADDRESS			Amendment to Report No.		CAMPAIGN FINANCE	
CITY		No. of Pages	3			
1. Contribution	ns Received				<u></u>	
DATE RECEIVED				CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOY (IF SELF-EMPLOYED, ENTER NAME OF B	
10/12/2016	Network Medi	ical Management, Inc.		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		\$3,000.00  Check if Loan  Provide interest rate
Reason for Amendmer	nt:				*Contributor Codes IND - Individual COM - Recipient Com OTH - Other (e.g., bus PTY - Political Party SCC - Small Contribut	

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