

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 2020		Date of This Filing 12/12/2019	Date Stamp 2019 DEC 13 AM 8: PROPOSITION B UNIT	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (213) 452-6565	I.D. NUMBER (if applicable) 1414462	Report No. 121219		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Los Angeles	STATE CA	ZIP CODE 90017	No. of Pages 4	

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
12/11/2019	Dennis Alfieri Pasadena, CA 91103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Principal Mission Real Estate Group	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
12/11/2019	Athens Services La Puente, CA 91746	<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
12/11/2019	Bea Bennett San Marino, CA 91108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	500.00 <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

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12/11/2019	Bea Bennett San Marino, CA 91108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
12/11/2019	Enterprise Motors, Inc. Whittier, CA 90601	<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
12/11/2019	Enterprise Motors, Inc. Whittier, CA 90601	<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

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RECEIVED BY
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Date Stamp
2019 DEC 13 AM 8:18
PROPOSITION B UNIT

497 CONTRIBUTION REPORT
CALIFORNIA FORM 497
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NAME OF FILER
Kathryn Barger for Supervisor 2020

AREA CODE/PHONE NUMBER (213)452-6565
I.D. NUMBER (If applicable) 1414462

STREET ADDRESS

CITY Los Angeles
STATE CA
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Date of This Filing 12/12/2019

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(explain below)

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12/11/2019	Kandis Jaffrey Pasadena, CA 91106	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
12/11/2019	Christopher Martin San Marino, CA 91108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO AC Martin Partners	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
12/11/2019	Diane Mendez-Padelford Artesia, CA 90701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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NAME OF FILER Kathryn Barger for Supervisor 2020		Date of This Filing 12/12/2019	Date Stamp 2019 DEC 13 AM 8:1 PROPOSITION B UNIT	CALIFORNIA FORM 497 For Official Use Only
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STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Los Angeles	STATE CA	ZIP CODE 90012	No. of Pages 4	

1. Contribution(s) Received

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12/11/2019	Tina Yang San Marino, CA 91108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Tina Yang	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
12/11/2019	Robert Yu Alhambra, CA 91801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate R.Y. Properties, Inc.	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
12/11/2019	Shirley Yu Alhambra, CA 91801	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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