

497 Contribution Report

GENERAL  
4<sup>th</sup> FILING  
ORIGINAL

in whole dollars.

RECEIVED BY

497 CONTRIBUTION REPORT

NAME OF FILER

DA Steve Cooley

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)

1235308

STREET ADDRESS

CITY

STATE

ZIP CODE

09/23/2010

Date Stamp

Report No.

1 cont.

Amendment to Report No. (explain below)

No. of Pages

2

2010 SEP 24 AM 11:50

CAMPAIGN FINANCE DISCLOSURE SECTION

CALIFORNIA FORM

497

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012769  
C05962

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
9/22/2010	Thomas Beck	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Thon Beck Vannie Callahan & Powell	1000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/22/2010	Michael Tuchin	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Klee Tuchin Bogdanoff & Stern	1000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/22/2010	Visco Financial Insurance Services	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00 <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: \_\_\_\_\_

p.3

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Linda Fianery

Sep 23 10 07 AM

# 497 Contribution Report

Type or print in Ink.  
Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER DA Steve Cooley		Date of This Filing 09/23/2010	Date Stamp LOS ANGELES COUNTY	CALIFORNIA FORM <b>497</b> For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1235308	Report No. 2010 SEP 24 AM 11:50		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)	CAMPAIGN FINANCE DISCLOSURE SECTION	
CITY	STATE	ZIP CODE	No. of Pages 2	

## 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
9/16/2010	Western Pacific Roofing Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/16/2010	Chlp Baldoni	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business owner Betty Boop Cars	1000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
9/16/2010	Donna Marie Melby	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Paul Hastings	1000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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

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Linda Flaherty  
Sep 23 12 57.10p