

497 Contribution Report

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

RECEIVED BY
LOS ANGELES COUNTY 497 CONTRIBUTION REPORT

NAME OF FILER RE-ELECT SUPERVISOR ANTONOVICH 2012		Date of This Filing 06/01/2012	Date Stamp 2012 JUN -2 AM 10:20 CALIFORNIA FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1342204	Report No. 05252012		
STREET ADDRESS		<input checked="" type="checkbox"/> Amendment to Report No. 05252012 (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
05/24/2012	JAFAR IMAD RASOOL	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGING MEMBER IJH, LLC	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/24/2012	CHRISTOPHER S. STEIN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NURSE ANESTHETIST NORTHRIDGE PAIN MANAGEMENT	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/24/2012	WATSON LAND COMPANY	<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

*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: _____
 ADDING OCCUPATION AND EMPLOYER INFORMATION

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NAME OF FILER
RE-ELECT SUPERVISOR ANTONOVICH 2012

AREA CODE/PHONE NUMBER _____ I.D. NUMBER (if applicable)
1342204

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

Date of This Filing 05/30/2012

Report No. 05302012

Amendment to Report No. _____
(explain below)

No. of Pages 1

Date Stamp
2012 MAY 31 AM 8:03

CAPITAL FINANCE
DISCLOSURE SECTION

CALIFORNIA FORM 497
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05/29/2012	REUBEN KUAN-CHUN CHEN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VICE PRESIDENT SUNRIDER INTERNATIONAL	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/29/2012	SERVICE EMPLOYEES INTERNATIONAL UNION LOCAL 721 CTW, CLC STATE & LOCAL (#743794)	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		1,000.00 <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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AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1342204	Report No. 05252012	CAMPAIGN FINANCE DISCLOSURE SECTION	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
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05/24/2012	JOSEPH MORREALE INSURANCE SALES	<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
05/24/2012	MALIBU R E INVESTMENTS LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/24/2012	CAROLYN MORREALE	<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

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STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
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05/24/2012	ARACELI RASOOL	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ADMINISTRATOR NORTHRIDGE PAIN MANAGEMENT	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/24/2012	HAIDER IMAD RASOOL	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INFORMATION REQUESTED	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/24/2012	IMAD RASOOL	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHYSICIAN IMAD RASOOL	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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05/25/2012 FRI 18:47 FAX 2134051498 0002/003

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05/24/2012	CHRISTOPHER S. STEIN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INFORMATION REQUESTED	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/24/2012	WATSON LAND COMPANY	<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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