497 Contrib	ution Report		Amounts may	be rounded to w	hole dollars, 05	RECEIVED BY ANGELES COUNTY	497 C	ONTRIBUTION REPORT
NAME OF FILER Najarian for Los Angeles County Supervisor 2016 AREA CODE/PHONE NUMBER LD. NUMBER (# applicable) 1376291 STREET ADDRESS CITY STATE ZIP CODE				1	03/30/2014	Date Stamp MAR 30 PM 2: 05 1PAIGN FINANCE	CALIFORNIA 497	
			ODE	(explain below)				
1. Contributi	on(s) Received							
DATE RECEIVED	FULL NAI	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE, ALSO ENTER I.D. NUMBER)				IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) AMOUNT RECEIVED		
03/29/2016	Sonia Akian		u .		IND COM OTH PTY SCC	Homemaker N/A		1,000.00
03/29/2016	Oceans Eleven Cas	ino		٧	☐ IND☐ COM☐ OTH☐ PTY☐ SCC			1,000.00
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC			Check If Loan "% Provide interest rate
Reason for Amen	dment:			•		"Contributor Codes IND – Individual COM – Recipient Con OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	usiness enti	ity)