497 Contrib	ution Report		Amounts	may be rounded to w	hole dollars.	RECEIVED BY	497 CO	NTRIBUTION REPORT
NAME OF FILER Rodriguez for Los Angeles Sheriff 2022 AREA CODE/PHONE NUMBER 1.D. NUMBER (if applicable)				Date of This Filing05/06/2022		2022 MAY -6 PM 2: CALIFORNIA FORM 497		
(626) 222–3822 1439325 STREET ADDRESS			Amendment to Report No.		PROPOSITION BUINT			
CITY	STATE ZIP		ZIP CODE	(explain below)				
West Covina		CA	91791	No. of Pages	1			
1. Contribution	on(s) Received	E, STREET ADDRESS A (IF COMMITTEE, ALSO	ND ZIP CODE OF CONTR	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLO (IF SELF-EMPLOYED, ENTER NAME OF BUS	OYER	AMOUNT RECEIVED
05/05/2022	Sirk Minasyan					Physician		1,500.00
	Reseda, CA 91335					Sirk Minasyan, MD		☐ Check if Loan
					□ scc			% Provide interest rate
05/05/2022	Eden on Brand	,			│ │ IND			1,500.00
	Glendale, CA 91203				COM SOTH			☐ Check if Loan
					□ scc			Provide interest rate
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC		:	☐ Check if Loan
								Provide interest rate
Reason for Amer	ndment:					*Contributor Codes IND – Individual COM – Recipient Commi OTH – Other (e.g., busin PTY – Political Party SCC – Small Contributor	ness entit	(y)