

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

NAME OF FILER <u>VILLANURVA FOR LOS ANGELES COUNTY SHERIFF 2022</u>		Date of This Filing <u>11/05/2022</u>	Date Stamp 22 NOV -7 AM 8:01 <i>11/5/22 For PROPOSITION 3 UNIT</i>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER <u>(310) 817-6679</u>	I.D. NUMBER (if applicable) <u>1397275</u>	Report No. <u>11522</u>		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <u>Inglewood</u>	STATE <u>CA</u>	ZIP CODE <u>90301</u>	No. of Pages <u>3</u>	

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
11/04/2022	R7 Consulting LLC(Mike Rogers) Denison, TX 75020	<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
11/04/2022	Polias Security Regiment Inc Pasadena, CA 91103	<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
11/04/2022	Joprden Gold Los Angeles, CA 90048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chief Executive Officer Superior Gold Consulting	1,500.00 <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: _____

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NOV -7 AM 8:01
11/5/22 FA
PROPOSITION B UNIT

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NAME OF FILER VILLANUEVA FOR LOS ANGELES COUNTY SHERIFF 2022		Date of This Filing 11/05/2022	Date Stamp NOV -7 AM 8:01	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (310) 817-6679	I.D. NUMBER (if applicable) 1397275	Report No. 11522		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages 3	
CITY Inglewood	STATE CA	ZIP CODE 90301		

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11/04/2022	Bella Vista Medical Group Sherman Oaks, CA 91403	<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
11/04/2022	Darlene Kuba Bradbury, CA 91008	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Kuba & Associates	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
11/04/2022	Fernando Lopez Whittier, CA 90601	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Owner El Mariachi Restaurant	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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NAME OF FILER VILLANUEVA FOR LOS ANGELES COUNTY SHERIFF 2022		Date of This Filing 11/05/2022	Date Stamp NOV - 7 AM 8:01 11/5/22 FAX PROPOSITION 6 UNIT	CALIFORNIA FORM 497 For Official Use Only
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11/04/2022	APPM Inc West Hollywood, CA 90069	<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
		<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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