

# 497 Contribution Report

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

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2014 MAY 12 AM 10:59  
CAMPAIGN FINANCE DISCLOSURE

497 CONTRIBUTION REPORT  
CALIFORNIA FORM 497  
For Official Use Only  
019317

NAME OF FILER Paul Tanaka for Sheriff 2014		Date of This Filing 05/09/2014
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1359651	Report No. 050914PT
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)
CITY Long Beach	STATE	ZIP CODE
		No. of Pages 1

## 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
05/08/2014	K3 Alliance, Inc.	<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
		<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

\*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: \_\_\_\_\_

MP

MAY 09 2014 03:11 PM FAX

# 497 Contribution Report

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RECEIVED BY 497 CONTRIBUTION REPORT

NAME OF FILER Paul Tanaka for Sheriff 2014		Date of This Filing 05/08/2014	Date Stamp 2014 MAY -8 PM 11 CAMPAIGN FINANCE DISCLOSURE STATE	CALIFORNIA FORM 497 For Official Use Only 019317
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1359651	Report No. 050814PT		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY	STATE	ZIP CODE	No. of Pages 1	

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05/07/2014	Tanya Elghauyan	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	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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Reason for Amendment: \_\_\_\_\_

May 08 2014 11:42AM HP FAX

# 497 Contribution Report

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497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Paul Tanaka for Sheriff 2014		<b>Date of This Filing</b> 05/08/2014	RECEIVED BY LOS ANGELES COUNTY Date Stamp 2014 MAY -9 AM 8:23 CAMPAIGN FINANCE DISCLOSURE SECTION	<b>CALIFORNIA FORM 497</b> For Official Use Only 019317
<b>AREA CODE/PHONE NUMBER</b>	<b>I.D. NUMBER (if applicable)</b> 1359651	<b>Report No.</b> 050814C		
<b>STREET ADDRESS</b>		<input type="checkbox"/> <b>Amendment to Report No.</b> (explain below)		
<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>		

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05/01/2014	Kevin Matossian  IN-KIND CONTRIBUTION	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Partner Film Solutions, Inc.	1,300.00  <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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