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

NAME OF FILER					Date of					tamp OINT	CALIFO		106
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014					This Fil	ing <u>10/18</u>	3/2014	<u>.</u>		· · · · · · · · · · · · · · · · · · ·	FOR		190
AREA CODE/PHONE NUMBER (Fapplicatie)					_			20 40	CT 20	AM 11: 02	For C	fficial Use	Only
1367856				Report	No. <u>1018201</u>	4	- A A.A	MA EMBLE	PW 3 St 4 d or on a sec				
STREET ADDRESS					to Repo	ndment ort No		DISCL	randa OSURE	FINANCE SECTION	4	085	\
CITY		STATE	ZIP CODE		(explain be	ow) Pages	3	_					
1. List Only One C	Candidate or Ballot Measu	re								= 11			
NAME OF CANDIDATE	E SUPPORTED OR OPPOSED				7	NAME OF BA	LLOT MEA	SURE SU	PPORTED O	R OPPOSED			
BOBBY SHRIVER					Ì								
OFFICE SOUGHT OR	F	STRICT NO.	SUPPORT	OPPOSE		BALLOT NO.A	ETTER		JURISDICT	ION		SUPPORT	OPPOSE
County Supervis	sor: LOS ANGELES		Х						<u> </u>				
2. Independent Ex	penditures Made Attach addi	tional informatio	n on appropi	riately labele	d continuati	on sheets.							
DATE			DE	SCRIPTION C	F EXPENDI	TURE						AMOUNT	
10/17/2014	STOCK PHOTOGRAPHS Cumulative to date	total \$55894	10.68	<u>-</u>									87.32
10/17/2014	VOTER FILE Cumulative to date	total \$55894	10.68					<u> </u>					1,795.94
10/17/2014	GRAPHIC DESIGN Cumulative to date	total \$55894	10.68										1,302.00
10/17/2014	MAILER Cumulative to date	total \$55894	10.68									•	57,110.20
Reason for Amendme	ent:										-		
									FPPC Tol	I-Free Helpline			iarch/2011 6/275-3772

Type or print in ink.

Amounts may be rounded to whole dollars.

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NAME OF FILER					Date of	LUS A Date Stamp	CALIFORNIA	406
COMMITTEE TO ELECT	BOBBY SHRIVER SUPER	VISOR 2014		1	This Filing		FORM	496
AREA CODE/PHONE NUMBER (l'applicable)						2014 OCT 20 AM	For Official U	se Only
1367856				Report No. 10182014				
STREET ADDRESS					☐ Amendment	CAMPAIGN FINA PISCLOSURE SEC		
					to Report No.	- higginange aft		
CITY		STATE	ZIPCODE		(explain below)			
				Ì	No. of Pages3	-	<u> </u>	
1. List Only One Ca	ndidate or Ballot Me	easure						
NAME OF CANDIDATE S	SUPPORTED OR OPPOSED				NAME OF BALLOT ME	ASURE SUPPORTED OR OPPOSE	D	
BOBBY SHRIVER								
OFFICE SOUGHT OR HE		DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO LETTER	JURISDICTION	SUPPO	RT OPPOSE
County Superviso: COUNTY, #3	r: LOS ANGELES		Х	İ			İ	- }
2. Independent Exp	enditures Made Attaci	h additional information	on on appropr	riately labele	d continuation sheets.		· · · · · · · · · · · · · · · · · · ·	
DATE					F EXPENDITURE		AMOU	NT
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10/17/2014	CONSULTING Cumulative to d	date total \$5589	40.68					10,000.0
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			<u></u>			•		
Reason for Amendmen	τ:		·	·	· ·			
			·			FPPC Tall-Free Us	FPPC Form 49	

LOS ANGELES COUNTY

496 INDEPENDENT EXPENDITURE REPORT

california 496

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I.D. NUMBER (If applicable)

GM FINA 1277 1367856 .

3. Contributions of \$100 or More Received*

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

NAME OF FILER

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	INTEREST RATES	
10/17/2014	ANNETTE C. BLUM	X IND COM OTH PTY	OWNER BLUM MEDIA INTERNATIONAL	10,000.00	If loan, enter interest rate, if any %	
10/17/2014	RUSSELL GOLDSMITH	IND COM OTH PTY SCC	CHAIRMAN AND CEO CITY NATIONAL BANK	5,000.00	If loan, enter interest rate, if any %	
10/17/2014	SHERRY LANSING	IND COM OTH PTY SCC	RETIRED	5,000.00	If loan, enter interest rate, if any	
10/17/2014	WATSON LAND COMPANY	IND COM IN OTH PTY SCC		5,000.00	If loan, enter interest rate, if any %	
		IND COM OTH PTY SCC			If loan, enter interest rate, if any %	
		IND COM OTH PTY			If loan, enter interest rate, if any	

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

**Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 496 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.

Amounts may be rounded to whole dollars.

Report No. 10172014 STREET ADDRESS Amendment to Report No	351	
This Filing 10/17/2014 REPORT NO. 10172014 REPORT NO. 10172014 This Filing 10/17/2014 REPORT NO. 10172014 CAMPAIGN FINANCE CAMPAIGN FINAN	351	
STREET ADDRESS Amendment to Report No. Campaign Final Post of C	351	
STREET ADDRESS Amendment to Report No. Campaign Final Post of	351	
CITY STATE ZIP CODE (explain below) No. of Pages2 1. List Only One Candidate or Ballot Measure NAME OF CANDIDATE SUPPORTED OR OPPOSED BOBBY SHRIVER OFFICE SOUGHT OR HELD County Supervisor: LOS ANGELES COUNTY, #3 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets. DATE DESCRIPTION OF EXPENDITURE (explain below) No. of Pages2 NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED BALLOT NO LETTER JURISDICTION SUPPOR AMOUN' 10/16/2014 NEWSPAPER AD)S\ T OPPOSE	
CITY STATE ZIP CODE (explain below) No. of Pages2 1. List Only One Candidate or Ballot Measure NAME OF CANDIDATE SUPPORTED OR OPPOSED BOBBY SHRIVER OFFICE SOUGHT OR HELD County Supervisor: LOS ANGELES COUNTY, #3 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets. DATE DESCRIPTION OF EXPENDITURE (explain below) No. of Pages2 NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED BALLOT NO.LETTER JURISDICTION SUPPOR AMOUN' 10/16/2014 NEWSPAPER AD	T OPPOSE	
STATE ZIP CODE (explain below) No. of Pages	T OPPOSE	
1. List Only One Candidate or Ballot Measure NAME OF CANDIDATE SUPPORTED OR OPPOSED BOBBY SHRIVER OFFICE SOUGHT OR HELD County Supervisor: LOS ANGELES COUNTY, #3 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets. DATE DESCRIPTION OF EXPENDITURE AMOUNT 10/16/2014 NEWSPAPER AD	T OPPOSE	
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10/16/2014 NEWSPAPER AD		
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Reason for Amendment:		
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FPPC Form 496 (FPPC Toll-Free Helpline: 866/ASK-FPPC (8	(march/201	

NAME OF FILER

RECEIVED BY 496 INDEPENDENT EXPENDITURE REPORT LOS ANGELES COUNTY CALIFORNIA 496

2014 OCT 20 AM 11: 02

CAMPAIRM FINANCIA 1367856

COMMITTEE TO BLECT BOBBY SHRIVER SUPERVISOR 2014	CAMPAIGN FINANCE DISCLOSURE FINANCE	1367856
		<u> </u>

3. Contribut	tions of \$100 or More Received*			* * * ** * * 3	
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	INTEREST RATES
10/16/2014	SUSAN HARRIS	X IND COM OTH PTY	WRITER SAMMY PRODUCTIONS	2,500.00	If loan, enter interest rate, if any %
10/16/2014	PAUL J. WITT	X IND COM OTH PTY	FILM PRODUCER WITT PRODUCTIONS	2,500.00	If loan, enter interest rate, if any %
		COM COM DOTH PTY			If loan, enter interest rate, if any
		DIND COM OTH PTY			If loan, enter interest rate, if any %
		IND COM OTH PTY			If loan, enter interest rate, if any %
		IND COM OTH PTY SCC			If loan, enter interest rate, if any %

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

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