APR-11-2016 06:58PM From:

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LOS ANGELES COUNTY

NAME OF FILER			ts may be rounded to	- Timete deliara,	2016 APR 12 MA - 497	CONTRIBUTION REPO
Najarian for Lo	os Angeles County Sun	STRICE 3016	Date of	45	D . ()	ORNIA 107
Najarian for Los Angeles County Supervisor 2016 AREA CODE/PHONE NUMBER I.D. NUMBER (# applicable)		This Filing	04/11/2016		ORM 497	
		i.e. Nowiser (a applicable)	D	16	A LINANCE	or Official Use Only
STREET ADDRESS		1376291	Report No.	16	-	A Clitcial Use Only
CITY		STATE ZIP CODE	Amendri to Report N (explain below)	lo		
1. Contributio	n(s) Received					
DATE RECEIVED 04/09/2016		. STREET ADDRESS AND ZIP CODE OF CONT (IF COMMITTEE, ALSO ENTER LD. NUMBER)	RIBUTOR	CONTRIBUTOR CODE *	(F AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
	Mihran P. Abrahamia			IND COM	Agent State Farm	500.0
				☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan
04/10/2016	Natalia Abramyan					Provide Interest rate
				IND COM OTH PTY SCC	Manager Uvana, LLC	1,500.0
4/10/2016	Karen L. Geragos					Provide Interest rate
				IND COM OTH PTY	Attorney Karen Geragos	1,500.00
				L		Provide Interest rate
ason for Amendme	ent:				*Contributor Codes IND Individual COM Recipient Committee (othe OTH Other (e.g., business entity PTY Political Party SCC Small Contributor Committee	v)

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APR-11-2016

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Najarian for Los Angeles County Supervisor 2016			Date of This Filing04/11/2016			FORM 497	
AREA CODE/PHONE NUMBER (if applicable)							
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TY		STATE ZIP CODE	(explain below)				
			No. of Page	85			
1. Contribut	ion(s) Receive	ed					
DATE RECEIVED	FU	LL NAME, STREET ADDRESS AND ZIP CODE OF CONTI (IF COMMITTEE ALSO ENTERLD NUMBER)	RIBUTOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYE	AMOUNT	
04/10/2016	Matthew Gerag	OB		CODE	(IF SELF-EMPLOYED, ENTER NAME OF BUSINE	SS) RECEIVED	
				X IND	Attorey Matthew Geragos	1,500.0	
				☐ COM☐ OTH			
				□ PTY		☐ Check if Loan	
				□ scc		<u> </u>	
04/10/2016	Lala Gevorkia	n			Teacher/Therapist	Provide interest rate	
				IND □ COM	GUBD/ARS	* 3,333	
				ОТН		☐ Check if Loan	
				□ PTY			
14/10/2016	Vanik Gevorkia			scc		Provide interest rate	
1,10,2010	Vanik Gevorkia	an.		X IND	President Southern California Clock	1,500.00	
				□ сом	Emporium Inc.		
				☐ OTH		☐ Check if Loan	
				☐ PTY ☐ SCC			
						Provide interest rate	
					*Contributor Codes		
					IND-Individual		
					COM - Recipient Committee	(other than PTY or SCC)	
eason for Amendment:					OTH - Other (e.g., business PTY - Political Party		
			-		SCC - Small Contributor Com	mittee	

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	os Angeles County Su		This Filing _	04/11/2016		FOI		9/
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STREET ADDRESS			☐ Amendme to Report No.					
CITY STATE ZIP CODE			(explain below)					
			No. of Pages	5				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE, ALSO ENTERED, NUMBER)		RIBUTOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUN	
04/10/2016	Edwin J. Kaftal				Retired	JI COGINESS!	1.	500.00
				IND □ COM	N/A			300.00
				☐ COM			☐ Check if t	1.000
				□ PTY			- CHECK II I	LOBIT
				☐ scc			Provide intere	%
04/09/2016	Anna Macciello				Retired	·		500.00
				IX IND ☐ COM	N/A			
				☐ COM			☐ Check if L	Long
				□ PTY			- Ollect II t	_Uaii
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04/10/2016	Nadadur Vardhan In	oc.						500.00
				☐ COM				
				COM TX OTH	. 2		C C	
				□ PTY	4- 7		Check if L	.oan
	1							
				□ scc			Provide Interes	%

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COM - Reciplent Committee (other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

IND - Individual

Reason for Amendment:

APR-11-2016 06:59PM From:

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER		Date of	Date Stamp	CALIFORNIA 107
Najarian for Los Angeles Cou	unty Supervisor 2016	This Filing 04/11/2016		CALIFORNIA 497
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1376291	Report No. 16		For Official Use Only
STREET ADDRESS		Amendment to Report No.		
CITY	STATE ZIP CODE	(explain below) No. of Pages 5		

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
04/09/2016	Lucine Nikogosian	IND COM OTH PTY SCC	Team Leader Cigna	1,500.00 Check if Loan Provide interest rate
04/10/2016	Noapara Enterprises	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		1,000.00 Check if Loan Provide interest rate
04/10/2016	Darrin J. Oganesian	IND COM OTH PTY SCC	Owner Oganesian Enterprises, Inc.	1,500.00 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

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2016

Reason for Amendment:

497 CONTRIBUTION REPORT

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Date Stamp

APR-11-2016 06:59PM From:

STREET ADDRESS CITY 1. Contribution	1.D. NUMBER (# applicable) 1376291 STATE ZIP CODE On(s) Received	Report No. 16 Report No. 16 Amendment to Report No. (explain below) No. of Pages 5	_	DRM 497
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUT	OR CONTRIBUTOR	ENTER OCCUPATION AND EMPLOYED	AMOUNT
04/10/2016	Ryan G. Oganesian	IND COM OTH PTY SCC	(FSELF-EMPLOYED ENTER NAME OF BUSINESS) Supervisor Mediwaste Disposal	RECEIVED 1,500.0 Check if Loan Provide Interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan % Provide interest rate
ason for Amendn	ent:		*Contributor Codes IND - Individual COM - Recipient Committee (other OTH - Other (e.g., business entit PTY - Political Party SCC - Small Contributor Committee	or than PTY or SCC)

Amounts may be rounded to whole dollars.

This Filing 04/11/2016

Date of

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497 Contribution Report

Najarian for Los Angeles County Supervisor 2016

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