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Najarian for Los Angeles County Supervisor 2016

I.D. NUMBER (# applicable)

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NAME OF FILER

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1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
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04/19/2016	Kevin C. Kang	IX IND □ COM	CEO Edgemine Co.	1,000.00
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04/19/2016	Katella Dental Group of Young Kim DDS Inc.	☐ IND		1,000.00
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*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

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