

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2018 MAY 11 PM 2:5
CAMPAIGN FINANCE

497 CONTRIBUTION REPORT
CALIFORNIA FORM 497
For Official Use Only

NAME OF FILER McDonnell for LA County Sheriff 2018			Date of This Filing 05/11/2018
AREA CODE/PHONE NUMBER (562)427-2100	I.D. NUMBER (if applicable) 1393521		Report No. 24757
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)
CITY Long Beach	STATE CA	ZIP CODE 90807	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
05/10/2018	Keith Brackpool Los Angeles, CA 90012	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman Cadiz, Inc.	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/10/2018	Bruce Macrae Long Beach, CA 90815	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President United Parcel Services	1,000.00 <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

*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: _____