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GP

ID:LA County RR/CC

497 CONTRIBUTION REPORT

AMOUNT

RECEIVED

Check if Loan

Provide interest rate

☐ Check if Loan

Provide interest rate

☐ Check if Loan

Provide interest rate

1,000.00

500.00

1,500.00

For Official Use Only

CALIFORNIA

FORM

Reason for Amendment:

NAME OF FILER	5 G		Date of This Filing	04/07/2022202	ANGELES COUNTY 4 APR -7 PM 4: 22		
AREA CODE/PHONE	for Supervisor 2022	I.D. NUMBER (if applicable)					
			Report No. 3	47761-CW	OPOSITION B UNIT		
(916) 285-5733 STREET ADDRESS		1443772	Amendment to Report No.				
CITY		STATE ZIP CODE	(explain below) No. of Pages2				
		CA 95815					
DATE RECEIVED	Thomas M. Priselac	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TRIBUTOR	CONTRIBUTOR CODE *	ENTER OCCUPATION AND EMPLOYE		
DATE	on(s) Received	IE, STREET ADDRESS AND ZIP CODE OF CON (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		
	Santa Monica, CA 9			☐ COM ☐ OTH ☐ PTY ☐ SCC	Officer Cedars-Sinai Medical Center		
04/06/2022	Thomas M. Priselac Santa Monica, CA 9			IND COM OTH PTY SCC	President & Chief Executive Officer Cedars-Sinai Medical Center		
04/06/2022	Ashley Ramstead Thousand Oaks, CA	91362		IND COM OTH PTY	Therapist Ashley Ramstead		

*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

FPPC Form 497 (Feb/2019) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

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ID:LA County RR/CC CFD

NAME OF FILER		Date of	Date Stamp CALIF	CALIFORNIA 107	
	for Supervisor 2022	Report No. 3499637890SITION Amendment to Report No. (explain below) No. of Pages 2		For	or Official Use Only
(916) 285-5733	NUMBER (# applicable) 1.4.4.3772				
STREET ADDRESS					
Sacramento	STATE ZIP CODE CA 95815				
1. Contributi	on(s) Received	-13csxx			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONT (IF COMMITTEE, ALSO ENTER LD. NUMBER)	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
04/06/2022	Regina Raphael Beverly Hills, CA 90210		IND COM OTH PTY SCC	Business Owner Mickey Fine	1,000.0
04/06/2022	James Woods Sonoma, CA 95476		IND COM OTH PTY	Attorney Woods Group Solutions	Check if Loan
			IND COM OTH PTY SCC		Check if Loan ** Provide interest rate
Reason for Amer	odment:			*Contributor Codes IND – Individual COM – Recipient Committee (o OTH – Other (e.g., business e PTY – Political Party SCC – Small Contributor Comm	ntity)

FPPC Form 497 (Feb/2019)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov