497 Contribution Report

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497 CONTRIBUTION REPORT

CALIFORNIA FORM **497**

NAME OF FILER McDonnell for LA County Sheriff	**Date of This Filing** 3/27/2014

2014 MAR 28 AM 10: 49

CAMPAIGN FINANC
DISCLOSURE SECTION

For Official Use Only

AREA CODE/PHONE NUMBER	**I.D. NUMBER (if applicable)** 1362923	**Report No.** 032614-01
STREET ADDRESS		☐ **Amendment to Report No.**
CITY **STATE** **ZIP CODE**		**No. of Pages** 2

1. Contributions 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
03/26/2014	Gold Coast Apartments	☑ IND ☐COM ☐OTH ☐PTY ☐SCC	Not Deposited	$1,500.00 ☐ Check If Loan _____% Provide interest rate
03/26/2014	Gold Coast Shopping Center	☑ IND ☐COM ☐OTH ☐PTY ☐SCC	Not Deposited	$1,500.00 ☐ Check if Loan _____% Provide interest rate
03/26/2014	Pacific Marina Venture	☑ IND ☐COM ☐OTH ☐PTY ☐SCC	Not Deposited	$1,500.00 ☐ Check if Loan _____% Provide interest rate

Reason for Amendment: _____

_____

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

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NAME OF FILER							
McDonnell for LA County Sheriff			Date of This Filing	3/27/2014	Date Stamp	CALIFORNIA FORM	**497**

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CITY	STATE ZIP CODE	No. of Pages 2	

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03/26/2014	Gold Coast Village, LLC	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$1,500.00 ☐ Check if Loan _____ % Provide interest rate
03/26/2014	Michael Zislis	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Restaurateur/Hotelier Zislis Group	$1,500.00 ☐ Check if Loan _____ % Provide interest rate

Reason for Amendment: _____

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CAMPAIGN FINANCE
DISCLOSURE SECTION

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CALIFORNIA
FORM **497**

For Official Use Only

NAME OF FILER McDonnell for LA County Sheriff	Date of This Filing 3/28/2014
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1362923	Report No. 032714-01
STREET ADDRESS	☐ Amendment to Report No.
CITY STATE ZIP CODE	No. of Pages 1

1. Contributions 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
03/27/2014	Richard S. Cohen	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Richard S. Cohen	$1,500.00 ☐ Check if Loan ____% Provide interest rate
03/27/2014	GE Property Development Inc.	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$1,500.00 ☐ Check if Loan ____% Provide interest rate
03/27/2014	Invest West Finance Corp	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$1,000.00 ☐ Check if Loan ____% Provide interest rate

Reason for Amendment: _____

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