2014-09-02 05:27:11 (GMT)

# To: LA County

# **497 Contribution Report**

### Type or print in ink. Amounts may be rounded to whole dollars.

			<u> </u>		7 - 2 - 1	CONTRIBUTION REPORT
NAME OF FILER			Date of	<u> </u>		FORNIA 497
BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL			This Filing	09/01/2014	1	
AREA CODE/PHONE N	UMBER	I.D. NUMBER (if applicable)	Report No. 1		10.1	or Official Use Only
STREET ADDRESS		1367527			A1	9343
STREET ADDRESS			Amendmer to Report No.		DARAMAN A SATION ON	7515
CITY		STATE ZIP CODE	(explain below)  No. of Pages	1		
1. Contribution	on(s) Received				*	
DATE RECEIVED	FULL NAM	ME, 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	AMOUNT RECEIVED
08/31/2014	Stephen Sheanin			X IND	Retired n/a	1,000.00
				OTH		☐ Check if Loan
				□ scc		Provide Interest rate
				☐ IND		
				☐ OTH ☐ PTY		☐ Check if Loan
				scc		Provide Interest rate
				☐ IND		
				OTH		☐ Check if Loan
·				_ scc		Provide interest rate
					*Contributor Codes	
					IND – Individual COM – Recipient Committee OTH – Other (e.g., business	
Reason for Amen	dment:			PTY – Political Party SCC – Small Contributor Com	mittee	

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



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NAME OF FILER			Date of	Tepp > or o	Date Stamp CALI	ORNIA 107
BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL			This Filing09/01/2014		6 01 0 0	ORM 497
AREA CODE/PHONE	NUMBER	I.D. NUMBER (if applicable)	Report No. 1		2014 SEP -2 PH 9: 0	or Official Use Only
		1367527	Report No. ±		, I.	
STREET ADDRESS			Amendment to Report No.		CALLOS AND THE O	19343
CITY		STATE ZIP CODE	(explain below)			
			No. of Pages	1		
1. Contributi	on(s) Received					
DATE RECEIVED	FULL N	IAME, 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
08/29/2014	Tom Hanks			X IND COM	Actor Tom Hanks	1,500.00
				OTH		☐ Check if Loan
			·	□ scc		Provide Interest rate
08/29/2014	George Soros			X IND	Chairman Soros Fund Management	1,500.00
				COM		
				OTH PTY		☐ Check if Loan
				scc		%
08/29/2014	Rita Wilson			<del> </del>	Actress	Provide interest rate 1,500.00
00/23/2014	RICA WIISON			X IND	Rita Wilson	1,300.00
		•		COM OTH PTY		☐ Check if Loan
				_ scc		Provide Interest rate
					*Contributor Codes	)
					IND – Individual COM – Recipient Committee (	other than PTY or SCC)
					OTH - Other (e.g., business PTY - Political Party	entity)
Reason for Amer	ndment:				SCC – Small Contributor Com	nittee

# Type or print in ink. Amounts may be rounded to whole dollars.

497	CON	TRIBIT	TION.	REPORT

						497 CONTRIBL	JIION REPORT
NAME OF FILER			Date of	- 12 Mg - 2 Mg	Date Stamp	CALIFORNIA	497
BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL			This Filing	08/29/2014	Comparison as a contract of the second of the	FORM	431
AREA CODE/PHONE NUMBER 1.D. NUMBER (if applicable) 1367527		Report No. 1	200	SEP -2 PM 9: 03	For Official U	Jse Only	
STREET ADDRESS			Amendmer to Report No.	ıt (14		0193	43
CITY		STATE ZIP CODE	(explain below) No. of Pages	2	BO ONE STATE OF STATE		
1. Contribution	on(s) Received				ms.		
DATE RECEIVED	FULL NAM	IE, STREET ADDRESS AND ZIP CODE OF CONT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	ributor	CONTRIBUTOR CODE *	LF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF	PLOTER   _	AMOUNT RECEIVED
08/28/2014	Anthem Blue Cross			☐ IND☐ COM☐ OTH☐ PTY☐		□ Ch	1,500.00 neck if Loan
	<b>\</b>			□ scc		Provid	le interest rate
08/28/2014	Netsol Technologie	s Inc.		☐ IND ☐ COM [X] OTH ☐ PTY ☐ SCC			1,500.60 neck if Loan % te interest rate
08/28/2014	Miriam Pink			IND COM OTH PTY SCC	CO-Owner Glen Park Retirement Com	□ Ch	1,500.00 leck if Loan % b interest rate
Reason for Amer	idment:				*Contributor Codes IND – Individual COM – Recipient Cor OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	usiness entity)	PTY or SCC)

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 868/ASK-FPPC (866/275-3772)



### Type or print in ink. **497 Contribution Report** Amounts may be rounded to whole dollars. RECEIVED BY 497 CONTRIBUTION REPORT NAME OF FILER Date Stamp Date of CALIFORNIA 08/29/2014 This Filing \_\_ BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL **FORM** AREA CODE/PHONE NUMBER I.D. NUMBER (#applicable) For Official Use Only Report No. 1 1367527 STREET ADDRESS Amendment to Report No. . (woled niskow) CITY STATE ZIP CODE No. of Pages . 1. Contribution(s) Received IF AN INDIVIDUAL. CONTRIBUTOR DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR AMOUNT ENTER OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER 1.D. NUMBER) CODE \* RECEIVED RECEIVED (F' SELF-EMPLOYED, ENTER NAME OF BUSINESS) 08/28/2014 Monica H. Rosenthal Actress 1,200,00 X IND Miss Peach Productions ☐ COM ☐ OTH Check if Loan ☐ PIY ☐ scc Provide interest rate 08/28/2014 Retired Charles Zacha 1,500.00 IND IND None ☐ COM □ отн Check if Loan ☐ PTY SCC Provide interest rate ☐ IND ☐ COM □ отн Check if Loan ☐ PTY ☐ SCC Provide interest rate

IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party

\*Contributor Codes

SCC - Small Contributor Committee

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 886/ASK-FPPC (866/275-3772)

Reason for Amendment:

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497 CONTRIBUTE	ON REPORT
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NAME OF FILER			Date of This Filing	08/28/2014	Date Refue IVED CALIFO LOS ANGELES FOR	ORNIA 497
BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL  AREA CODE/PHONE NUMBER  LD. NUMBER (# applicable)  1367527  STREET ADDRESS		Report No. 1		2014 AUG 29 AM 9: 28	Official Use Only	
СІТУ		STATE ZIP CODE	Amendman to Report No. (explain below) No. of Pages	·	CAMPAIGN FINANCE DISCLOSURE SECTION	
1. Contribution	on(s) Received					,
DATE RECEIVED	FULL NAM	ME, STREET ADDRESS AND ZIP CODE OF CONTR (IF COMMITTEE, ALSO ENTER ID, MJMBER)	(BUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, EMTER NAME OF BUSINESS)	AMOUNT RECEIVED
08/27/2014	John Branca			IND COM OTH PTY SCC	Attorney Ziffren Brittenham LLP	1,500.00
0B/27/2014	Kichael Lambert			IND COM ☐ OTH ☐ PTY ☐ SCC	CEO Lambert Media Group	1,500.00  Check if Loan  Provide interest rate
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan  Check if Loan  Provide interest rate
Reason for Amer	ndment:				*Contributor Codes IND – Individual COM – Recipient Committee (oth OTH – Other (e.g., business eni PTY – Political Party SCC – Smell Contributor Committee	er than PTY or SCC) ity)

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 868/ASK-FPPC (866/275-3772)

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NAME OF FILER				Date of	00/07/0014	RECE <b>Pate Stamp</b>	CALIFORNI	A 407
BOBBY SHRIVER F	OR SUPERVISOR 2014 GE	NERAL		This Filing	08/27/2014	ANGELES COUNTY	FORM	TOI
AREA CODE/PHONE N	UMBER	1.D. NUMBI 1367527	R (fapplicebb)	Report No. 1	<del></del>	4 AUG 28 AM 10: 49	For Official	-
STREET ADDRESS				Amendment to Report No.	nt (	AMPAIGN FINANCE SCLOSURE SECTION	0193	<b>43</b>
CITY			STATE ZIP CODE	No. of Pages	•			
1. Contribution	on(s) Received							
DATE RECEIVED	FULL NAME	E, STREET A	ADDRESS AND ZIP CODE OF CONTR LIMITEE, ALSO ENTER LD. NUMBER)	RIBUTOR .	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMI (F SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED
08/26/2014	Diego Berdakin	,			IND COM OTH	Owner Beachwint		1,500.00 Check if Loan
					scc		Pron	-X vide interest rete
08/26/2014	Herbert Boeckmann	man de la companya de			IND COM OTH PTY SCC	Owner Galpin Motors		1,500.00 Chack if Loan
08/26/2014	Jane Boeckmann				IND COM	Homemaker None	<u> </u>	1,500.00 Check if Loan
Reason for Amer	ndment					*Contributor Codes IND – Individual COM – Recipient Com OTH – Other (e.g., bt PTY – Political Party SCC – Small Contribut	nmittee (other than usiness enlity)	

FPPC Form 497 (March/2011) FPPC Toll-Free Helptine: 866/ASK-FPPC (866/275-3772)



497 Contribu
NAME OF FILER
BOBBY SHRIVER :
STREET ADDRESS
СІТУ
1. Contributi
DATE RECEIVED
08/26/2014

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Amounts may be rounded to whole dollars

497 Contribu	ıtion Report	Amount	Type or print in ink. s may be rounded to wi		850004 <b>487</b> 0	CONTRIBUTION REPORT
NAME OF FILER BOBBY SHRIVER I	FOR SUPERVISOR 2014 G	I.D. NUMBER (if applicable)	Date of This Filling	08/27/2014	2014 AUG 28 AM 10 12 For	ORNIA 107
STREET ADDRESS	,	STATE ZIP CODE	Amendmal to Report No. (explain below)		CAMPAIGN FINANCE DISCLOSURE SECTION	
1. Contribution	on(s) Received					
DATE RECEIVED	FULL NAM	IE, STREET ADDRESS AND ZIP CODE OF CONT (F COMMITTEE, ALSO ENTER 1,0. NUMBER)	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
08/26/2014	Citizens for Joe K	ennedy		IND   COM   OTH   PTY   SCC		1,500.00
08/26/2014	Joseph Hakim			IND COM OTH PTY SCC	Retired None	1,500.00  Check if Loan  Provide interest rate
08/26/2014	Karen Hakim			IND COM OTH SCC	Retired None	1,500.00
Reason for Amer	ndment:				*Contributor Codes  IND – Individual  COM – Recipient Committee (oth  OTH – Other (e.g., business enl  PTY – Political Party  SCC – Small Contributor Commit	ner than PTY or SCC)

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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497 Contribu	ution Report	nounts may be rounded to whole dellars.		RECEIVED NA	497 CONTRIBUTION REPORT
NAME OF FILER		Date of	1.0		CALIFORNIA 407
BOBBY SHRIVER	FOR SUPERVISOR 2014 GENERAL	This Filing		in an analysis is in	FORM 43
AREA CODE/PHONE	(UMBER (d'applicable)	_		4 AUG 28 AM 10: 49	For Official Use Only
	1367527				
STREET ADDRESS		Amendment to Report No.	DIS	MPAIGN FINANCE CLOSURE SECTION	
CITY	STATE ZIP CODE	(explain below)  No. of Pages 4			
1. Contributi	on(s) Received				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE O			IF AN INDIVIDUAL. ENTER OCCUPATION AND EMP IIF SEXF-EMPLOYED, ENTER NAME OF E	
08/26/2014	Elizabeth Kennedy			Program Director	3.500.00

### X IND Massachusetts Clean Energy Center COM □ OTH Check if Loan □ PTY ☐ SCC Provide interest rate 08/26/2014 Los Angeles United Investment Company 1,000.00 ☐ IND ☐ COM ▼ OTH ☐ Check if Loan □ PTY ☐ scc Provide interest rate 08/26/2014 Malibu R E Investments LLC 1,000.00 IND ☐ COM X OTH ☐ Check if Loan ☐ PTY ☐ SCC 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)

497 Contribu	ıtion Report	Amoun'	Type or print in ink. its may be rounded to wi		RECEI 49	7CONTRIBUTION REPORT	
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BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL			This Filing	08/27/2014	ani, A. Tales COUNTE		
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STREET ADDRESS		122012	☐ Amendmento Report No.	nt D	CAMPAIGN FINANCE SCLOSURE SECTION		
CITY		STATE ZIP CODE	(explain below) No. of Pages				
1. Contributi	on(s) Received						
DATE RECEIVED	FULL NAME	IE, STREET ADDRESS AND ZIP CODE OF CON (IF COMMITTEE, ALSO ENTER LD, MANAGER)	FIRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS		
08/26/2014	Polis Builders LTD			☐ IND		1,500.00	
				IN OIH		☐ Check if Loan	
				☐ scc		Provide interest rate	
08/26/2014 Ch	Cheryl Saban			IX IND	Philanthropist Cheryl Saban	1,500.00	
				□ OTH □ PTY		☐ Check if Loan	
				scc		Provide Interest rate	
08/26/2014 Naim Saban	Haim Saban			IX) IND	Chairman Saban Capital Group	1,500.00	
				OTH		☐ Check if Loan	
				□ scc		Provide interest rate	
					*Contributor Codes		
Reason for Amen	ndment:				IND - Individual COM - Recipient Committee ( OTH - Other (e.g., business PTY - Political Party  SCC - Small Contributor Committee	entity)	

FPPC Form 497 (March/2011) FPPC Toil-Free Halpline: 865/ASK-FPPC (866/275-3772)