

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER McDonnell for LA County Sheriff 2014		Date of This Filing 09/03/2014	RECEIVED BY LOS ANGELES CO 2014 SEP -3 PM 12:24 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1362923	Report No. 082914-01		
STREET ADDRESS		<input checked="" type="checkbox"/> Amendment to Report No. 1		
CITY	STATE	ZIP CODE		

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
08/31/2014	Archeon International Group	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/31/2014	Chris Carbonel	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Business Owner N.W. Properties	\$1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/31/2014	Doctor Crants	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Financial Consultant LCS Holdings, LLC	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: Added PAC ID

\*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

NO. 4139  
 California Political Law Inc  
 Sep. 3. 2014 12:10PM

**497 Contribution Report**

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<b>AREA CODE/PHONE NUMBER</b>	<b>I.D. NUMBER (if applicable)</b> 1362923	<b>Report No.</b> 082914-01		
<b>STREET ADDRESS</b>		<input checked="" type="checkbox"/> <b>Amendment to Report No.</b> 1		
<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>		

**1. Contributions Received**

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08/31/2014	Megan Garcia	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Paralegal Milstein Adelman	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/31/2014	Tammy Garcia	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Environmental Business Owner Advanced Environmental Group	\$1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/31/2014	Dwayne Hall	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Management Consultant Related Strategies	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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497 CONTRIBUTION REPORT

NAME OF FILER McDonnell for LA County Sheriff 2014		Date of This Filing 09/03/2014	RECEIVED BY LOS ANGELES COUNTY 2014 SEP -3 PM 12:25 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	LD. NUMBER (if applicable) 1362923	Report No. 082914-01		
STREET ADDRESS		<input checked="" type="checkbox"/> Amendment to Report No. 1		
CITY	STATE	ZIP CODE		

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
08/31/2014	Aria Kozak	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Elite Interactive Solutions	\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/29/2014	LA School Police Association	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
08/29/2014	LA School Police Sergeants & Lieutenants Association PAC	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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**NAME OF FILER**  
McDonnell for LA County Sheriff 2014

**AREA CODE/PHONE NUMBER** \_\_\_\_\_ **I.D. NUMBER (if applicable)**  
1362923

**STREET ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**Date of This Filing** 09/03/2014

**Report No.** 082914-01

**Amendment to Report No.** 1

**No. of Pages** \_\_\_\_\_

RECEIVED BY  
LOS ANGELES COUNTY  
2014 SEP -3 PM 12: 25  
CAMPAIGN FINANCE  
DISCLOSURE SECTION

**CALIFORNIA FORM 497**

For Official Use Only

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08/29/2014	Carmen Trutanich	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Tucker Ellis	\$1,500.00 <input type="checkbox"/> Check if Loan Provide interest rate _____%
08/31/2014	Michael Tumanjan	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Contractor Michael Tumanjan, G.C.	\$1,000.00 <input type="checkbox"/> Check if Loan Provide interest rate _____%
08/31/2014	Gustavo Valdivia	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Gustavo Valdivia	\$1,000.00 <input type="checkbox"/> Check if Loan Provide interest rate _____%

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