2014-09-28 01:25:22 (GMT)

497 Contribution Report

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Amounts may be rounded to whole dollars.

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NAME OF FILER BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL		Date of This Filing 09/27/2014	Date Stamp \ MGEL	CALIFORNIA 107
AREA CODE/PHONE NUMBER	I.D. NUMBER (If applicable)		2014 SEP 29	PM For Official Use Only
STREET ADDRESS	130/32/	X Amendment to Report No. 222	DISCLOSURE	019343
DITY	STATE ZIP CODE	(explain below) No. of Pages5	·	

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
09/25/2014	Paul Attanasio	IND COM OTH PTY SCC	Screnwriter Paul Attanasio	1,500.00 Check if Loan -% Provide interest rate
09/25/2014	Amanda Benefiel	X IND COM OTH PTY SCC	Artist Amanda Benefiel	1,500.00 Check if Loan % Provide Interest rate
09/25/2014	Robert Iger	X IND COM OTH PTY SCC	Chairman/CEO The Walt Disney Company	1,500.00 Check if Loan Provide Interest rate

Reason for Amendment: 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



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No. of Pages5		
	Date of This Filing 09/27/2014 Report No. 222 Management to Report No. 222 (explain below)	Date of This Filing 09/27/2014 Report No. 222 X Amendment to Report No. 222 (explain below) CAMPAIGN FINANCE DISCLOSURE SECTION

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
09/25/2014	Michael Oddo	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Manager Metro Express	1,500.00 Check if Loan
09/25/2014	Margaret Perenchio		Artists Margaret Perenchio	1,500.00 Check if Loan % Provide interest rate
09/25/2014	Ratpac Entertainment, LLC	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		1,500.00 Check if Loan ** Provide Interest rate

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

Reason for Amendment: AMENDMENT

497	Con	tributio	n Report
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497 Contribl	ition Report	Amount	ts may be rounded to v	whole dollars.	I ON RECEIVA 497 CC	ONTRIBUTION REPORT
NAME OF FILER BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL AREA CODE/PHONE NUMBER I.D. NUMBER (If applicable) 1367527 STREET ADDRESS CITY STATE ZIP CODE		Date of This Filing		Date Stamp ANGE CALIFORM 2014 SEP 25 PMFox CAMPAIGN FINANCE DISCLOSURE SECTION	PRNIA 497 Official Use Only 37	
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DATE RECEIVED	FULL NAN	ME, STREET ADDRESS AND ZIP CODE OF CON- (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
09/25/2014	Nelson Rising			X IND COM OTH PTY SCC	Chairman & CEO Rising Realty Partners	1,500.00 Check if Loan % Provide Interest rate
09/25/2014	Sharon Rising				Homemaker None	1,500.00 Check if Loan ** Provide Interest rate
09/25/2014	Jane Semel			IND COM OTH PTY SCC	Executive iJane Inc.	1,500.00 Check if Loan ** Provide interest rate
Reason for Amen	ndment: AMENDMENT				*Contributor Codes IND – Individual COM – Recipient Committee (oth OTH – Other (e.g., business ent PTY – Political Party SCC – Small Contributor Commit	tity)

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Type or print in ink. **497 Contribution Report** Amounts may be rounded to whole dollars. 497 CONTRIBUTION REPORT NAME OF FILER 2014 SEP 29 PM 2 37 F CAMPAIGN FINANCE DISCLOSURE SECTION CAL!FORNIA Date of This Filing _____09/27/2014 **FORM** BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) J / For Official Use Only Report No. 222 1367527 STREET ADDRESS X Amendment to Report No. 222 (explain below) CITY STATE ZIP CODE No. of Pages __

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/25/2014	Terry Semel		Executive Windsor Media	1,500.00 Check if Loan % Provide Interest rate
09/25/2014	Marcel Sitcoske		Art Consultant Marcel Sitcoske	1,500.00 Check if Loan Rrovide interest rate
09/25/2014	Michele Soon-Shiong	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Actress Michele Soon-Shiong	1,500.00 Check if Loan ** Provide Interest rate

Reason for Amendment: AMENDMENT

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To: LA County P.

497 Contribution Report

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NAME OF FILER BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL AREA CODE/PHONE NUMBER I.D. NUMBER (# applicable) 1367527 STREET ADDRESS CITY STATE ZIP 1. Contribution(s) Received		,	Amounts may be rounded to whole dollars. Date of This Filing		I DO RECEIVED 497CO	ONTRIBUTION REPORT
		I.D. NUMBER (if applicable)			CAMPAIGN FINANCE TON	RNIA 497 M Official Use Only
DATE RECEIVED	FULL NAM	E, STREET ADDRESS AND ZIP CODE (IF COMMITTEE, ALSO ENTER I.D. NUMBE		CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/25/2014	Patrick Soon-Shion			IND COM OTH PTY SCC	Founder NantWorks	1,500.00 Check if Loan % Provide Interest rate
09/25/2014	Dem Warren			IND COM OTH PTY SCC	Attorney Sloane Offer Weber and Dem LLP	1,000.00 Check if Loan ** Provide interest rate
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan "" Provide Interest rate
Reason for Amer	ndment: AMENDMENT				*Contributor Codes IND – Individual COM – Recipient Committee (oth OTH – Other (e.g., business en PTY – Political Party SCC – Small Contributor Commit	tity)