

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

NAME OF FILER McDonnell for LA County Sheriff 2018		Date of This Filing 10/15/2018	Date Stamp OCT 16 AM 8:55	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER {562} 427-2100	ID. NUMBER (if applicable) 1393521	Report No. 27878	CAMPAIGN FINANCE	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages 1	
CITY Long Beach	STATE CA	ZIP CODE 90807		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/12/2018	Arif Mansuri Fullerton, CA 92831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Owner Tubular Specialties Manufacturing, Inc.	1,400.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/14/2018	Deborah Mansuri Fullerton, CA 92831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Manager Tubular Specialties Manufacturing, Inc.	1,400.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

***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

Reason for Amendment: _____