

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER FRIENDS OF JAMES HELLMOLD FOR SHERIFF 2014		Date of This Filing 05/27/2014	Date Stamp 2014 MAY 27 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1363140	Report No. 05272014	For Official Use Only	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY	STATE	ZIP CODE	No. of Pages 4	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
05/23/2014	MARIE J. BRYAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HOMEMAKER	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/23/2014	CAESARS PLAZA, LLC	<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
05/23/2014	EXPRESS AUTO RECONDITION	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <input type="checkbox"/> 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

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NAME OF FILER
FRIENDS OF JAMES HELLMOLD FOR SHERIFF 2014

AREA CODE/PHONE NUMBER _____ **I.D. NUMBER (if applicable)**
1363140

STREET ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

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CAMPAIGN FINANCE DISCLOSURE SECTION

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05/23/2014	JAKE PERMANIAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER/VICE PRESIDENT SUPER KING MARKET	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/23/2014	LENA PERMANIAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HOMEMAKER	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/23/2014	CARLO GOSDANIAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRODUCE DIRECTOR SUPER KING MARKET	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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FORM: 05/27/2014 16:08 #088 P.002/004

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NAME OF FILER FRIENDS OF JAMES HELLMOLD FOR SHERIFF 2014		Date of This Filing <u>05/27/2014</u>	Date Stamp LOS ANGELES 2014 MAY 27 PM 4:11 CAMPAIGN FINANCE DISCLOSURE REPORT	CALIFORNIA FORM 497 For Official Use Only
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05/23/2014	RAFFI HATZAKORTZIAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DENTIST HATZAKORTZIAN DENTAL LABORATORY INC	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/23/2014	RAFFI INDJIAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER RAFFI'S AUTO BODY SHOP	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/23/2014	GEORGE KEVIN OUZOUNIAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER I JEWELRY COM INC.	1,000.00 <input type="checkbox"/> 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)

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NAME OF FILER FRIENDS OF JAMES HELLMOLD FOR SHERIFF 2014		Date of This Filing <u>05/27/2014</u>	RECEIVED BY Date Stamp 2014 MAY 27 PM 1:11 CAMPAIGN FINANCE DISCLOSURE BOARD	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1363140	Report No. <u>05272014</u>		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
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05/23/2014	JOHN SIMPSON	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INVESTMENT BANKER BROADHAVEN CAPITAL PARTNERS	1,500.00 <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
		<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

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NAME OF FILER FRIENDS OF JAMES HELLMOLD FOR SHERIFF 2014		Date of This Filing 05/28/2014	Date Stamp LOS ANGELES OFFICE 2014 MAY 29 PM 2:21 CAMPAIGN FINANCE DISCLOSURE REPORT	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1363140	Report No. 05282014		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
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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
05/27/2014	CHARLES FORMAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/27/2014	JANE FORMAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
05/27/2014	FORMAN PRODUCTIONS, INC.	<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

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