

497 Contribution Report

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

RECEIVED BY  
LOS ANGELES COUNTY 497 CONTRIBUTION REPORT

NAME OF FILER McDonnell for LA County Sheriff 2014		Date of This Filing 10/09/2014	Date Stamp 2014 OCT 10 AM 11:11 CAMPAIGN FINANCIAL DISCLOSURE SECTION	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	ID. NUMBER (if applicable) 1362923	Report No. 100814-01		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No.		
CITY Long Beach	STATE CA	ZIP CODE 90807	No. of Pages	

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
10/08/2014	Michael Soderberg	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Consultant Mike Soderberg & Associates	\$1,500.00  <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