

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL		Date of This Filing 11/03/2014	RECEIVED ANGELES COUNTY	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1367527	Report No. 3	2014 NOV -4 AM 8:25	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	CAMPAIGN FINANCE DISCLOSURE SECTION	
CITY	STATE	ZIP CODE	No. of Pages 1	

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
10/30/2014	Entravision 131-KDD	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,499.60 <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

*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: _____

RW

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NAME OF FILER BOBBY SHRIVER FOR SUPERVISOR 2014 GENERAL <hr/> AREA CODE/PHONE NUMBER _____ I.D. NUMBER (if applicable) _____ 1367527 <hr/> STREET ADDRESS _____ <hr/> CITY _____ STATE _____ ZIP CODE _____	Date of This Filing 11/03/2014 <hr/> Report No. 1 2014 NOV -4 AM 8:25 <hr/> <input type="checkbox"/> Amendment to Report No. _____ (explain below) <hr/> No. of Pages 3	RECEIVED BY LOS ANGELES COUNTY <hr/> Date Stamp NOV -4 AM 8:25 <hr/> CAMPAIGN FINANCE DISCLOSURE SECTION
		CALIFORNIA FORM 497 For Official Use Only

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
10/31/2014	Abdul Wahab Andrew	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Shangri-La Construction	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/31/2014	Stephen Bing	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Producer Stephen Bing	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/31/2014	Howard Buffett	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farmer Howard Buffett	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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1. Contribution(s) Received

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10/31/2014	Creekside Advertising	<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
10/31/2014	Kevin Ehrhart	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Latham & Watkins LLP	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/31/2014	Alan Fuerstman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Founder and CEO Montage Hotels & Resorts	1,500.00 <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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AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1367527	Report No. 1		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY	STATE	ZIP CODE	No. of Pages 3	

1. Contribution(s) Received

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10/31/2014	Armine Minasian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Amata Bella Inc.	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/31/2014	Murad Minasian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sr. Account Executive Levi Strauss & Co.	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/31/2014	Denise Modrzejewski	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker None	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		No. of Pages <u>1</u>
CITY	STATE	ZIP CODE		

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10/31/2014	XXLA IN-KEND	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,499.60 <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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AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1367527	Report No. <u>2</u> <u>2014 NOV -4 AM 8:25</u>		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	CAMPAIGN FINANCE DISCLOSURE SECTION	
CITY	STATE	ZIP CODE	No. of Pages <u>1</u>	

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10/31/2014	ClearChannel Worldwide	<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
10/31/2014	Plumbers & Pitters Local 761	<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
		<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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AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1367527	Report No. 34	2014 NOV -4 AM 8:26	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	CAMPAIGN FINANCE DISCLOSURE SECTION	
CITY	STATE	ZIP CODE	No. of Pages	1

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11/02/2014	Nancy Albers	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administrative Assistant Irvine Unified School District	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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AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1367527	Report No. 33		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY	STATE	ZIP CODE		

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
11/02/2014	All Town Ambulance LLC	<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
		<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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AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1367527	Report No. 35		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY	STATE	ZIP CODE	No. of Pages 1	

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
11/03/2014	Bell Cab Management	<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
11/03/2014	Los Angeles Food & Beverage PAC Committee ID # 1297199	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
11/03/2014	Richard Merkin	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None.	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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