

Late Contribution Report

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

NAME OF FILER
Jeffrey Prang for Assessor 2018

AREA CODE/PHONE NUMBER
(323) 655-4065

E.D. NUMBER (if applicable)
1396928

STREET ADDRESS

CITY STATE ZIP CODE
Encino CA 91436

Date of This Filing 09/12/2018

Report No. LCR-2018091

Amendment to Report No. _____
(explain below)

No. of Pages 3

RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2018 SEP 13 AM 11:00
CAMPAIGN FINANCE
1/3

LATE CONTRIBUTION REPORT
CALIFORNIA
FORM 497
For Official Use Only

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
09/11/2018	Amalgamated Transit Union Local 1277 Los Angeles CA 90031 ID: 970941	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00
09/11/2018	Asian American Small Business PAC Los Angeles CA 90071 ID: 1276929	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00
09/11/2018	Los Angeles Dodgers LLC Los Angeles CA 90012 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00

*Contributor Codes

IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other


PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment: _____

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LATE CONTRIBUTION REPORT

NAME OF FILER Jeffrey Prang for Assessor 2018		Date of This Filing _____	Report No. _____	 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1396928			
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages _____	2 / 3
CITY	STATE ZIP CODE			

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		

Reason for Amendment: _____

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NAME OF FILER Jeffrey Prang for Assessor 2018		Date of This Filing _____ Report No. _____ <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages _____	RECEIVED BY LOS ANGELES COUNTY Date Stamp 2018 SEP 13 AM 11:51 CAMPAIGN FINANCE 3/3	LATE CONTRIBUTION REPORT CALIFORNIA 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1396928			
STREET ADDRESS				
CITY	STATE	ZIP CODE		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
09/11/2018	Rendon for Assembly 2018 Long Beach CA 90807 ID: 1393414	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00
09/11/2018	Thary Ung West Covina CA 91792 ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lead Mechanic MTA	1000.00
09/11/2018	Wonderful Company LLC Los Angeles CA 90064 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00

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Reason for Amendment: _____

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RECEIVED BY LOS ANGELES COUNTY LATE CONTRIBUTION REPORT

NAME OF FILER Jeffrey Prang for Assessor 2018		Date of This Filing 09/12/2018	RECEIVED BY LOS ANGELES COUNTY 2018 SEP 13 PM 4:48 CAMPAIGN FINANCE 1/2	CALIFORNIA 497 For Official Use Only
AREA CODE/PHONE NUMBER (323) 655-4065	I.D. NUMBER (if applicable) 1396928	Report No. LCR-20180905-1		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Encino	STATE CA	ZIP CODE 91436		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
09/05/2018	Craig Darian Los Angeles ID: CA 90038	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Occidental Entertainment Holdings Inc	1314.79
09/05/2018	Virginia Maas Beverly Hills ID: CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker n/a	500.00
	ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

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