

# 497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER Leilani Kimmel-Dagostino For Torrance City Council 2016			Date of This Filing 5-6-16	Date Stamp <b>RECEIVED</b>  MAY 6 2016 <i>10:27am</i> City of Torrance City Clerk's Office	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1370226		Report No. LAKD2		
STREET ADDRESS [REDACTED]			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Torrance	STATE CA	ZIP CODE 90503	No. of Pages 1		

## 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
5-5-16	Aram Chahbazian [REDACTED] Santa Ana, CA 92705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Partner TCA Architects, Inc.	\$1,000.00  <input type="checkbox"/> Check if Loan  _____% Provide interest rate
5-5-16	Irwin Yau [REDACTED] Irvine, CA 92602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Partner TCA Architects, Inc.	\$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

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