

497 Contribution Report

Amounts may be rounded to whole dollars.

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CAMPAIGN FINANCE

497 CONTRIBUTION REPORT

NAME OF FILER Dr. Armina Gharpetian for Glendale School Board District C 2022		Date of This Filing 03/28/2022	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (818) 257-0387	I.D. NUMBER (if applicable) 1355555	Report No. 102	
STREET ADDRESS _____		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Glendale	STATE CA	ZIP CODE 91205	
		No. of Pages 3	

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
03/22/2022	Sarkis Ourfalian Glendale, CA 91203	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Ourfalian & Ourfalian	500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
03/25/2022	Malekset Allahdadi Glendale, CA 91208	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Store Manager Glendale West Pharmacy	500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
03/25/2022	Chenar Honarchian Glendale, CA 91208	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	500.00 <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: _____

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03/27/2022	Sevag Avanesian Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Self Employed	1,190.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
03/27/2022	Dr. Armen Manssourian, DMD Glendale, CA 91202	<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
03/27/2022	Katie Hanson Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Customer Broker MBC	1,190.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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CALIFORNIA FORM 497

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1441687

NAME OF FILER
Dr. Armina Gharpetian for Glendale School Board District C 2022

AREA CODE/PHONE NUMBER (818) 257-0387 **I.D. NUMBER (if applicable)** 1355555

STREET ADDRESS

CITY Glendale **STATE** CA **ZIP CODE** 91205

Date of This Filing 03/28/2022

Report No. 102

Amendment to Report No. _____
(explain below)

No. of Pages 3

1. Contribution(s) Received

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03/28/2022	Vigen and Mary Markarian CA, CA 91208	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Owner Self Employed	500.00
		<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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