497 CONTRIDE 1456983	ution Report		Amounts	may be rounded to wi	nole dollars.	RECEIVED BY 497C	," ONTRIBUTION REPOR
NAME OF FILER				Date of	04/28/2022	CALIFO	DRNIA 107
	rpetian for Glendale			This Filing	04/28/2022	2022 JUN -6 PM	
AREA CODE/PHONE NUMBER (If applicable)		le)	Report No. 106		For Official Use		
(818)257-0387		1355555				CAMPAIGN FINANCE	
STREET ADDRESS				Amendment to Report No.			
CITY		STATE	ZIP CODE	(explain below)			
Glendale .		CA	91205	No. of Pages	2		
1. Contributio	on(s) Received						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			RIBUTOR	CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
04/27/2022	Thomas Alexanian				X IND	Business Owner	500.0
	Glendale, CA 91208				□ COM	Self Employed	
					ОТН		☐ Check if Loan
					☐ PTY		
					□ scc		Provide interest rate
04/27/2022	Christeil Gota					CEO	200.0
	Glendale, CA 91202			,	IND ☐ COM	Hawaii Cancer Care	
					OTH		☐ Check if Loan
					☐ PTY		_ Crieck ii Loan
					□ scc		%
04/27/2022	Maria Zakarian					Office Clerk	Provide interest rate
	Burbank, CA 91506			⊠ IND	Kevin Taban		
	:				☐ COM ☐ OTH ☐ PTY		☐ Check if Loan
					scc		Provide interest rate
						*Contributor Codes	
						IND – Individual  COM – Recipient Committee (oth  OTH – Other (e.g., business en	ner than PTY or SCC) lity)
Reason for Amen	dment:					SCC – Small Contributor Commit	

FPPC Form 497 (Feb/2019)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

NAME OF FILER				Date of		LOS TRIPOLLES COALIFO	RNIA 497
Dr. Armina Gha	rpetian for Glendale	School Board Dist	rict C 2022	This Filing	04/28/2022	FOR	RM 431
REA CODE/PHONE N	NUMBER	I.D. NUMBER (if applicable	0)	Poport No. 106		2022 JUN -6 PM 3- 3-3 Official Use Only	
(818) 257-0387 1355555			Report No. 106		CAMPAIGH FINANCE		
TREET ADDRESS				☐ Amendment		CAPITAION FRANCE	
				to Report No			
ITY	STATE ZIP C		ZIP CODE	(explain below)			
Glendale		CA	91205	No. of Pages	2		
. Contributi	on(s) Received						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTR (IF COMMITTEE, ALSO ENTER LD. NUMBER)			RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
04/28/2022	Armen Janian AJ Aff			□ IND		250.	
	Glendale, CA 91207	7			□ COM		
					☑ OTH		☐ Check if Loan
					☐ PTY		-
					□ scc		Provide interest rate
04/28/2022	Sevan Benlian			X IND	Engineer	500.	
	Glendale, CA 91202	2			COM	Self Employed	
					ОТН		☐ Check if Loan
					☐ PTY		
					□ scc		Provide interest rate
04/28/2022	Onnik Mehrabian				Business Owner	690.	
	Los Angeles, CA 90	0065				Self Employed	
					OTH		☐ Check if Loan
					☐ PTY		Olicok ii zodii
					□ scc		%
						,	Provide interest rate
						*Contributor Codes	
						IND-Individual	
						COM – Recipient Committee (oth OTH – Other (e.g., business ent	er than PTY or SCC)
Reason for Amen	admont:					PTY - Political Party	
teason for Amen	idifierit.					<ul> <li>SCC – Small Contributor Committee</li> </ul>	ee

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