

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER Kuehl For Supervisor 2014		Date of This Filing 09/12/2014	Date Stamp RECEIVED LOS ANGELES CO 2014 SEP 15 AM 10:30 CAMPAIGN FINANCE DISCLOSURE SECTION 1/3	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1355019	Report No. LCR-20140911		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
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
09/11/2014	Cristina Arguedas  ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cristina Arguedas	1000.00
09/11/2014	Burton For Superintendent of Public Instruction 2018  ID: 1	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00
09/11/2014	Patricia Flumenbaum  ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired n/a	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: \_\_\_\_\_

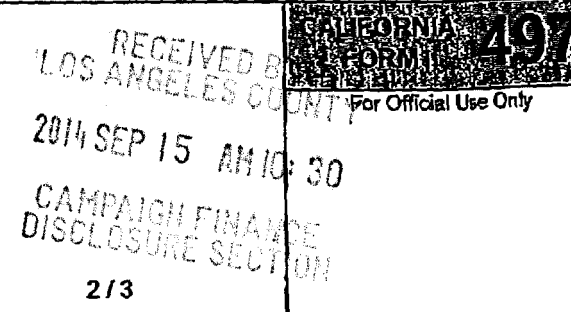
PADILLA & ASSOCIATES

09/12/2014 04:55 3236554068

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STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>	
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)
1	ID:	Ballot: Dist:		
1	ID:	Ballot: Dist:		
1	ID:	Ballot: Dist:		
1	ID:	Ballot: Dist:		

Reason for Amendment: \_\_\_\_\_

PADILLA & ASSOCIATES

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09/12/2014 04:55

