## 497 Contribution Report

|   |   |                                | Amounts ma | y be rounded to who                     | ie dollars.                    |   |                     |   |  |
|---|---|--------------------------------|------------|---|--------------------------------|---|---------------------|---|--|
| NAME OF FILER  Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley- Thomas Committee for a Better L.A. with support from a coalition of Nonprofit |   |                                |            | Date of<br>This Filing                  | 3/8/2017                       | Date Stamp  | CALIFORNIA FORM 497 |   |  |
| Organizations, Businesses and Labor Orgs  AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable)  1392723  |   |                                | Report No. | Report No030817A                        |                                | Fo  | r Official Use Only |   |  |
| STREET ADDRESS  |   |                                |            | Amendment to Report No. (explain below) | nt                             |   |                     |   |  |
| CITY  |   | STATE                          | ZIP CODE   | No. of Pages                            | 3                              |   |                     |   |  |
| 1. Contribution   | ns Received   |                                |            |   |                                |   |                     |   |  |
| DATE<br>RECEIVED  | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) |                                |            | ITOR                                    | CONTRIBUTOR<br>CODE *          | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)                            |                     | AMOUNT<br>RECEIVED                                  |  |
| 03/07/2017  | _   | s Committee o<br>Lation of Hos | _          |   | ☐ IND  ☑ COM ☐ OTH ☐ PTY ☐ SCC |   |                     | \$10,000.00  Check if Loan  % Provide interest rate |  |
|   | ID: 880212  |                                |            |   |                                |   |                     |   |  |
| 03/07/2017  | CBS Corporat  | cion                           |            |   | ☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC  |   |                     | \$10,000.00  Check if Loan  % Provide interest rate |  |
| Reason for Amendmen   | nt:   |                                |            |   |                                | *Contributor Codes IND - Individual COM - Recipient Co OTH - Other (e.g., b PTY - Political Party SCC - Small Contrib | usiness entit       |   |  |

FPPC Form 497 (Jul/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

## 497 Contribution Report

Amounts may be rounded to whole dollars.

| NAME OF FILER Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley- Thomas Committee for a Better L.A. with support from a coalition of Nonprofit |               |   |          | Date of<br>This Filing | 3/8/2017   | Date Stamp   |                                    | FORM 497   |  |
|--|---------------|---|----------|------------------------|--|--|------------------------------------|--|--|
| Organizations, Businesses and Labor Orgs  AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable)  1392723   |               | Report No. 030817A  Amendment to Report No. (explain below) |          |                        | Fc   | For Official Use Only  |                                    |  |  |
| STREET ADDRESS   |               |   |          |                        |  |  |                                    |  |  |
| CITY   |               | STATE   | ZIP CODE | No. of Pages           | 3  |  |                                    |  |  |
| 1. Contribution  | ns Received   |   |          | 1                      |  |  |                                    |  |  |
| DATE<br>RECEIVED   | FULL NAM      | ZIP CODE OF CONTRIBU<br>FER I.D. NUMBER)                    | TOR      | CONTRIBUTOR<br>CODE *  | IF AN INDIVIDUAL,<br>ENTER OCCUPATION AND EMPI<br>(IF SELF-EMPLOYED, ENTER NAME OI | AMOUNT<br>RECEIVED   |                                    |  |  |
| 03/07/2017   | Englander Ki  | nabe & Allen  |          |                        | ☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC  |  |                                    | \$5,000.00  Check if Loan  % Provide interest rate |  |
| 03/07/2017   | John Griffith |   |          |                        | ✓ IND  ☐ COM  ☐ OTH  ☐ PTY  ☐ SCC  | CEO<br>Kedren Medical Cen  | ter                                | \$1,000.00 Check if Loan % Provide interest rate   |  |
| 03/07/2017   | Dwayne Hall   |   |          |                        | ✓ IND  COM  OTH  PTY  SCC  | Chairman<br>CHC, Inc.  |                                    | \$1,000.00  Check if Loan  % Provide interest rate |  |
| Reason for Amendmen  | nt:           |   |          |                        |  | *Contributor Code IND - Individual COM - Recipient ( OTH - Other (e.g., PTY - Political Par SCC - Small Cont | Committee (oth<br>, business entit |  |  |

## 497 Contribution Report

Amounts may be rounded to whole dollars.

|   |   |              | Amounts ma       | ty be rounded to writ                   | ne dollars.                       |   |                       |  |
|---|---|--------------|------------------|---|-----------------------------------|---|-----------------------|--|
| NAME OF FILER  Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley- Thomas Committee for a Better L.A. with support from a coalition of Nonprofit |   |              |                  | Date of<br>This Filing                  | 3/8/2017                          | Date Stamp  | CALIFO<br>FOI         | // / /   |
| Organizations, Businesses and Labor Orgs  AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable)  1392723  |   |              | Report No030817A |   |                                   | Fo  | r Official Use Only   |  |
| STREET ADDRESS  |   |              |                  | Amendment to Report No. (explain below) |                                   |   |                       |  |
| CITY  |   | STATE        | ZIP CODE         | No. of Pages                            | 3                                 |   |                       |  |
| 1. Contribution   | ns Received   |              |                  |   |                                   |   |                       |  |
| DATE<br>RECEIVED  | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) |              |                  | JTOR                                    | CONTRIBUTOR<br>CODE *             | IF AN INDIVIDUAL,<br>ENTER OCCUPATION AND EMPLO<br>(IF SELF-EMPLOYED, ENTER NAME OF                           | CUPATION AND EMPLOYER |  |
| 03/07/2017  | David Housto  | on           |                  |   | ✓ IND  ☐ COM  ☐ OTH  ☐ PTY  ☐ SCC | CEO<br>Barney's Beanery   |                       | \$1,000.00  Check if Loan  Provide interest rate |
| 03/07/2017  | Los Angeles   | Child Guidar | ace Clinic       |   | ☐ IND☐ COM☐ OTH☐ PTY☐ SCC         |   |                       | \$3,500.00 Check if Loan % Provide interest rate |
| Reason for Amendme  | nt:   |              |                  |   |                                   | *Contributor Codes<br>IND - Individual<br>COM - Recipient Co<br>OTH - Other (e.g., b<br>PTY - Political Party | ousiness entit        | er than PTY or SCC)                              |

SCC - Small Contributor Committee

FPPC Form 497 (Jul/2016)

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov