



# Late Contribution Report

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

NAME OF FILER Soils For Supervisor 2018		
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1395229	
STREET ADDRESS		
CITY	STATE	ZIP CODE

Date of This Filing \_\_\_\_\_

Report No. \_\_\_\_\_

Amendment to Report No. \_\_\_\_\_  
(explain below)

No. of Pages \_\_\_\_\_

LATE CONTRIBUTION REPORT

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## 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)
02/12/2020	Firefighters & Neighbors for Safer Communities - Yes on Measure FD  Los Angeles CA 90017 ID: 1424050	Ballot: Dist:	10000.00	03/03/2020
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		

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