STEVE NAPOLITANO FOR SUPERVISOR 2016  AREA CODE/PHONE NUMBER  LD. NUMBER (# applicable)  1374406  STREET ADDRESS  CITY  STATE ZIP CODE			Date of This Filing 03/15/2016  Report No. 1  Amendment to Report No. (explain below) No. of Pages 1		CALIFORNIA 497	
					2016 MAR 16 AM 8 4 Ford CAMPAIGN FINANCE	Midal Use Only
					OTH DESIGNATION.	
. Contributio	n(s) Received					
DATE RECEIVED	FULL NAM	E, STREET ADDRESS AND ZIP CODE OF CON (FCOMMITTEE, ALSO ENTER I.D. NUMBER)	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL. ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
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					*Contributor Codes  !ND – Individual  COM – Recipient Committee (ott  OTH – Other (e.g., business en  PTY – Political Party  SGC – Small Contributor Commit	itity)

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