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NAME OF FILER Coalition to Supp	er for Supervisor 2016	Data of		RECEIVED BY ANGELES COUNTY Date Stamp APR 19 AM 7: 54	CALIFO	RNIA 49	
AREA CODE/PHONE NUM		I.D. NUMBER (if applicable)	Report No. 04	1182016-1 CA	MPAIGN FINANCE	FOR	Official Use Only
STREET ADDRESS		1381057	☐ Amendme	ent	MITAIGN FINANCE		
CITY	The second section of the sect	STATE ZIP CODE	(explain below) No. of Pages				
1. Contribution	(s) Received						
DATE RECEIVED	FULL NAM	E, STREET ADDRESS AND ZIP CODE OF CONTR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMP (IF SELF-EMPLOYED, ENTER NAME OF B	LOYER	AMOUNT RECEIVED
04/18/2016 G	Garrett Dylan	15		X IND COM OTH PTY SCC	Real Estate Broker David Spiegel & Associate	25	7,500
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				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loar
Reason for Amendment:					*Contributor Codes IND—Individual COM—Recipient Comn OTH—Other (e.g., bus PTY—Political Party SCC—Small Contributo	iness entity	r than PTY or SC(
Reason for Amendmen	nt:				PTY – Political Party	r Committee	PC Form