ID: CAMPAIGN FINANCE

DEC-28-2016 04:43PM From:2134526575

Reason for Amendment:

497 Contributio	Amount	s may be rounded to wh	may be rounded to whole dollars.  RECEIVED BY  OS ANGELES COUNTY			
NAME OF FILER Communities United to End Homelessness  AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable) 1392723  STREET ADDRESS  CITY  STATE ZIP CODE			Date of This Filling 12/28/2016  Report No. 122816A  Amendment to Report No.  No. of Pages 1		Date Stamp CALIF	ORNIA 407
						or Official Use Only
					CAMPAIGN FINANCE	
1. Contribution	ons Received					Unit fine
DATE RECEIVED	FULL NA	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIE (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
12/27/2016	Continental	l Development Corp.		☐ IND☐COM☐OTH☐PTY☐SCC		\$100,000.

FPPC Form 497 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (886/275-3772)
www.fppc.ca.gov

COM - Recipient Committee (other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

\*Contributor Codes IND - Individual