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497 Contribution	Report		Amounts may	y be rounded to wh		MISSING C	OUNT I		
NAME OF FILER Firefighters and Neighbors for Safer Communities - Yes on Measure FD, Sponsored by Los Angeles County Fire Fighters, IAFF Local 1014				Date of This Filing	2/27/2020	DMAR - 2 DARS		CALIFO	707
AREA CODE/PHONE NUI (213) 452-6565		I.D. NUMBER (if applicable) 1424050		Report No	022720A	OPOSITION	BUNH .	For Official Use Only	
STREET ADDRESS				Amendme to Report No. (explain below)					
ciry Los Angeles		STATE Z	90017	No. of Pages	1				
1. Contribution	s Received								
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)			AMOUNT RECEIVED
02/26/2020	Southern Cal	ifornia Edison			☐ IND ☐ COM ☑ OTH ☐ PTY				\$49,500.00
	NOSEMERAL, CH		· .		□scc				Provide interest rate
		~							
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Reason for Amendment:

*Contributor Codes
IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Smell Contributor Committee

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