

Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER
Kuehl For Supervisor 2014

AREA CODE/PHONE NUMBER _____ I.D. NUMBER (if applicable)
1355019

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

Date of This Filing 10/14/2014

Report No. LCR-20141015

Amendment to Report No. _____
(explain below)

No. of Pages 2

RECEIVED BY
LOS ANGELES COUNTY

Date Stamp
2014 OCT 15 AM 11:21

CAMPAIGN FINANCE
DISCLOSURE SECTION

1/2

CALIFORNIA FORM 497
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Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (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
10/13/2014	Frank Agrama ID: _____	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Harmony Gold	1500.00
10/13/2014	Simon T ID: _____	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Reliiod n/a	1500.00
	ID: _____	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

*Contributor Codes

IND - Individual PTY - Political Party
COM - Recipient Committee (other than PTY or SCC) SCC - Small Contributor Committee
OTH - Other

Reason for Amendment: _____

Date Stamp FPPC Form 497 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

PADILLA & ASSOCIATES

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10/14/2014 19:39