497 Contrib	ution Report	Amounts	may be rounded to	whole dollars.	RECEIVED BY 4970	ONTRIBUTION REPORT
NAME OF FILER  Huff for Supervisor 2016  AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable)  1376107  STREET ADDRESS  CITY STATE ZIP CODE		Date of This Filing 03/11/2016  Report No. 2016-1  Amendment to Report No. (explain below)  No. of Pages 1		2016 MAR 14 PM 3: FOR Official Use Only CAMPAIGN FINANCE		
1. Contribut	ion(s) Received	I				
DATE RECEIVED	FULL	NAME, STREET ADDRESS AND ZIP CODE OF CONTR (FCCMMITTEE ALSO ENTER ID. NUMBER)	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (F SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
03/10/2016	Archiwest Desig	gn Group		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		1,500.00  Check if Loan  % Provide interest rate
03/10/2016	Gordon Ted Li			IND COM OTH SCC	Contractor Touchstone Construction Development, Inc	1,500.00  Check if Loan  Provide interest rate
				☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan  **  Provide interest rate
Reason for Amen	dment:				Contributor Codes IND – Individual COM – Recipient Committee (oth OTH – Other (e.g., business ent PTY – Political Party SCC – Small Contributor Commit	ity)