

Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley-Thomas Committee for a Better L.A. with support from a coalition of Nonprofit Organizations, Businesses and Labor Orgs		Date of This Filing <u>03/07/2017</u>	Date Stamp	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1392723	Report No. <u>021617A</u>	For Official Use Only	
STREET ADDRESS		<input checked="" type="checkbox"/> Amendment to Report No. <u>001</u> <small>(explain below)</small>	1 / 5	
CITY	STATE	ZIP CODE	No. of Pages <u>5</u>	

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
02/08/2017 	William Bloomfield ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	25000.00
02/15/2017 	William Bloomfield ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	25000.00
02/14/2017 	Cerrell Associates, Inc. ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00

***Contributor Codes**

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

Reason for Amendment: Contributions Received Amended

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LATE CONTRIBUTION REPORT

NAME OF FILER Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley-Thomas Committee for a Better L.A. with support from a coalition of Nonprofit Organizations, Busi- ness and Industry		Date of This Filing _____ Report No. _____ <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages _____	2 / 5
AREA CODE / PHONE NUMBER STREET ADDRESS CITY	I.D. NUMBER (if applicable) 1392723 STATE ZIP CODE	CALIFORNIA FORM 497 For Official Use Only	

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		

Reason for Amendment: _____

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NAME OF FILER Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley-Thomas Committee for a Better L.A. with support from a coalition of Nonprofit Organizations, Busi- <small>PLEASE PRINT FULL NAME</small>		Date of This Filing _____ Report No. _____ <input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small> No. of Pages _____	Date Stamp 3 / 5	CALIFORNIA FORM 497 For Official Use Only
<small>AREA CODE PHONE NUMBER</small> _____	<small>I.D. NUMBER (if applicable)</small> 1392723			
<small>STREET ADDRESS</small> _____				
<small>CITY</small> _____	<small>STATE</small> _____	<small>ZIP CODE</small> _____		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
02/15/2017 	Cerrell Associates, Inc. ID: _____	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00
02/02/2017 	Downtown Women's Center ID: _____	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25000.00
02/15/2017 	Downtown Women's Center ID: _____	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		20000.00

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01/18/2017 	Shelter Partnership, Inc. ID: _____	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00
02/15/2017 	Shelter Partnership, Inc. ID: _____	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5000.00
02/15/2017 	Lucinda Starrett ID: _____	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lawyer Latham & Watkins	1000.00

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02/15/2017 	University of Southern California ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50000.00
02/15/2017 	Watson Land Company ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2500.00

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