

Late Contribution Report

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

LATE CONTRIBUTION REPORT

| | | | | |
|--|---|---|-----|------------------------------|
| NAME OF FILER NOGUEZ ASSESSOR 2010 | | Date of This Filing _____ | 2/2 | 497 For Official Use Only |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1316104 | Report No. _____ | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small> | | |
| CITY | STATE | ZIP CODE | | |
| | | No. of Pages _____ | | |

Late Contribution(s) Made

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

Reason for Amendment: _____

002/002

DAVID GOULD

10/20/2010 14:26 FAX