



0002/002  
 DAVID GOULD  
 10/26/2010 10:09 FAX

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

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

## 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:		

Reason for Amendment: \_\_\_\_\_