

Late Contribution Report

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

NAME OF FILER
Mayor Eric Garcetti's Ballot Measure Committee, Yes on M

AREA CODE/PHONE NUMBER _____ **I.D. NUMBER (if applicable)**
1373926

STREET ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

Date of This Filing _____

Report No. _____

Amendment to Report No. _____
(explain below)

No. of Pages _____

RECEIVED BY
LOS ANGELES COUNTY

2016 OCT 25 PM 5 37

CAMPAIGN FINANCE

2 / 2

LATE CONTRIBUTION REPORT

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)
10/24/2016 	Yes on Measure M-a Coalition of Mayor Eric Garcetti, concerned citizens, labor organizations, businesses & non-profits ID: 1387269	Los Angeles County Traffic Improvement Plan Los Angeles County Ballot: M Dist:	3700.00	11/08/2016
10/24/2016 	Yes on Measure M-a Coalition of Mayor Eric Garcetti, concerned citizens, labor organizations, businesses & non-profits ID: 1387269	Los Angeles County Traffic Improvement Plan Los Angeles County Ballot: M Dist:	500.00	11/08/2016
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		

Reason for Amendment: _____