



**FAXED**  
**LA COUNTY**

Amounts may be rounded to whole dollars.

# 497 Contribution Report

RECEIVED BY  
LOS ANGELES COUNTY  
497 CONTRIBUTION REPORT

|   |  |   |   |   |
|---|--|---|---|---|
| <b>NAME OF FILER</b><br>NEIGHBORHOOD SAFETY COALITION (SPONSORED BY ASSOCIATION FOR LOS ANGELES DEPUTY SHERIFFS) A COMMITTEE TO SUPPORT ALEX VILLANUEVA FOR LA COUNTY |  | <b>Date of This Filing</b> <u>11/01/2018</u>  | <b>Date Stamp</b><br>2018 NOV -2 AM 10:00<br>CAMPAIGN FINANCE | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br>(213) 489-4792   | <b>ID. NUMBER (if applicable)</b><br>1412957 | <b>Report No.</b> <u>4</u>  |   |   |
| <b>STREET ADDRESS</b><br><br>   |  | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br><small>(explain below)</small> |   |   |
| <b>CITY</b><br>LONG BEACH   | <b>STATE</b><br>CA                           | <b>ZIP CODE</b><br>90802  | <b>No. of Pages</b> <u>1</u>                                  |   |

## 1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br><small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>                                 | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br><small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED  |
|---------------|--|---|--|--|
| 10/26/2018    | Los Angeles County Federation of Labor AFL-CIO Council on Political Education<br>Los Angeles, CA 90006<br>Committee ID # 742204<br>IN KIRB-POL | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | 19,000.00<br><br><input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate                  |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  | <input type="checkbox"/> Check if Loan<br>_____%<br>Provide interest rate                  |

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

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