

Late Contribution Report

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

NAME OF FILER
Jeffrey Prang for Assessor 2018

AREA CODE/PHONE NUMBER
(323) 655-4065

I.D. NUMBER (if applicable)
1396928

STREET ADDRESS

CITY Encino **STATE** CA **ZIP CODE** 91436

Date of This Filing 05/01/2018

Report No. LCR-20180426

Amendment to Report No. _____
(explain below)

No. of Pages 2

RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2018 MAY -2 AM 9:
CAMPAIGN FINANCE
1/2

LATE CONTRIBUTION REPORT
CALIFORNIA
FORM 497
For Official Use Only

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
04/26/2018 	Bob Etebar Beverly Hills CA 90210 ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COO Etco Homes Inc	1000.00
	ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
	ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

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

Reason for Amendment: _____