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LEIDERMAN ASSOC
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R=96%

Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER			Date of This Filing 05/14/2018	Date Stamp	CALIFORNIA FORM 497
Solis For Supervisor 2018				RECEIVED BY LOS ANGELES COUNTY 2018 MAY 15 AM 8:00 CAMPAIGN FINANCE	For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable)		Report No. LCR-2018051 1		
(323) 655-4065	1395229		☐ Amendment to Report No. _____ (explain below)		
STREET ADDRESS			No. of Pages 2	1/2	
CITY	STATE	ZIP CODE			
Encino	CA	91436			

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
05/11/2018	Marilyn Ziering Beverly Hills CA 90210 ID:	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired n/a	1000.00
	ID:	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		
	ID:	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		

*Contributor Codes

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

Reason for Amendment: _____

Date Stamp