

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

RECEIVED BY
LOS ANGELES COUNTY
2016 JUN -2 PM 2:21
CAMPAIGN FINANCE

CALIFORNIA FORM 497
For Official Use Only

NAME OF FILER
Huff for Supervisor 2016

AREA CODE/PHONE NUMBER _____ **I.D. NUMBER (if applicable)**
1376107

STREET ADDRESS _____

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

Date of This Filing 06/02/2016

Report No. 2016-33

Amendment to Report No. _____
(explain below)

No. of Pages 1

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
06/01/2016	Xiao Wang	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Golden Bridge, Inc	1,500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
06/02/2016	Catharine Baker	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	State Assemblymember State of California	1,250.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
06/02/2016	Dan Baker	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Hoge, Fenton, Jones & Appel	1,250.00 <input type="checkbox"/> Check if Loan _____% 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: _____