

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER Solis For Supervisor 2018			Date of This Filing 05/07/2018	RECEIVED BY LOS ANGELES COUNTY 2018 MAY -8 AM 8:16 CAMPAIGN FINANCE 1/2	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (323) 855-4065	I.D. NUMBER (if applicable) 1395229		Report No. LCR-20180504		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Encino	STATE CA	ZIP CODE 91436	No. of Pages 2		

## 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
05/04/2018	Planned Parenthood Advocacy Project Los Angeles County Action Fund  Sacramento CA 95814 ID: 971616	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00
05/04/2018	SCI Shared Resources LLC  Houston TX 77219 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00
	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: \_\_\_\_\_