

497 Contribution Report

Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY

497 CONTRIBUTION REPORT

CALIFORNIA FORM **497**
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NAME OF FILER
Yes on Measure W Safe, Clean Water for LA County, A Coalition of Environmentalists, Business Leaders, Clean Water Advocates, and

AREA CODE/PHONE NUMBER _____ **I.D. NUMBER (if applicable)**
1407942

STREET ADDRESS _____

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

Date of This Filing 10/26/2018

Report No. 10/26/2018

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 I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/25/2018	Jason Pereira Fullerton, CA 92831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/26/2018	CDM Smith Boston, MA 02109	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<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: _____