

Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER Weste For City Council 2014		Date of This Filing 3-21-2014	Date Stamp CITY OF SANTA CLARITA	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 980093	Report No. 6	2014 MAR 21 P 2:30	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	RECEIVED CITY CLERKS OFFICE	
CITY	STATE ZIP CODE	No. of Pages 1 of 2		

Late 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
3/20/2014	BizFev	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CITY OF ...	1000.00 <input type="checkbox"/> Check if Loan
3/20/2014	Cameron Smyth For Senate 2018	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REP ...	500.00 <input type="checkbox"/> Check if Loan
3/21/2014	Joseph CASO	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CITY OF ...	1000.00 <input type="checkbox"/> Check if Loan

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

Reason for Amendment: _____

Late Contribution Report

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LATE CONTRIBUTION REPORT

NAME OF FILER <i>Waste For City Council 2014</i>		Date of This Filing <i>3-21-2014</i>	Date Stamp	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) <i>980093</i>	Report No. <i>B.</i>	CITY OF SANTA CLARITA	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	2014 MAR 21 P 2:30	
CITY	STATE	ZIP CODE	RECEIVED CITY CLERKS OFFICE	
		No. of Pages <i>2 of 2</i>		

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<i>3/21/2014</i>	<i>Brook Field Los Angeles</i>	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>SANTA CLARITA</i>	<i>1000.00</i> <input type="checkbox"/> Check if Loan
<i>3/21/2014</i>	<i>Waste Connections Inc.</i>	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>SANTA CLARITA</i>	<i>1000.00</i> <input type="checkbox"/> Check if Loan
<i>3/20/2014</i>	<i>G+L Realty</i>	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>SANTA CLARITA</i>	<i>500.00</i> <input type="checkbox"/> Check if Loan

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OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment: _____