

# Late Contribution Report

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

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CITY CLERK  
Date Stamp

LATE CONTRIBUTION REPORT

CALIFORNIA FORM 497

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**NAME OF FILER**  
Taxpayers for Open and Accountable Government No on Measure V  
Sponsored by the Orange County Employees Association

**AREA CODE/PHONE NUMBER** (916) 556-1776

**I.D. NUMBER (if applicable)** 1346919

**STREET ADDRESS**  
830 N Ross St

**CITY** Santa Ana      **STATE** CA      **ZIP CODE** 92701

**Date of This Filing** 10/23/2012

**Report No.** LGR-20121023

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 2

2012 OCT 24 PM 4: 1

CITY OF COSTA MESA  
BY \_\_\_\_\_

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## 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
10/23/2012	Democratic Party of Orange County 3700 Wilshire Blvd Ste 10508  Los Angeles CA 90010 ID: 742006	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10000.00
	ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
	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: \_\_\_\_\_