

Late Contribution Report

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

RECEIVED

LATE CONTRIBUTION REPORT

NAME OF FILER Tim Brown for Council 2014		Date of This Filing 09-07-14	Date Stamp 2011 SEP -8 AM OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH EMAILED ON 9-7-14	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 949-640-6662	I.D. NUMBER (if applicable) 1360420	Report No. 3		
STREET ADDRESS 562 Vista Flora		<input type="checkbox"/> Amendment to Report No. (explain below) No. of Pages 1		
CITY Newport Beach	STATE CA	ZIP CODE 92660		

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
09-06-14	Kathy Hamilton	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$1100.00 <input type="checkbox"/> Check if Loan
		<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
		<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

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Reason for Amendment: _____