

Late Contribution Report

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

RECEIVED LATE CONTRIBUTION REPORT

NAME OF FILER Phil Greer for City Council 2016		Date of This Filing <u>10/20/2016</u>	Date Stamp 2016 OCT 21 AM 8:04	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 209-656-1542	I.D. NUMBER (if applicable) 1384405	Report No. <u>-1</u>		
STREET ADDRESS 1300 Bristol Street North Suite 100		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH EMAILED 10-20-16	
CITY Newport Beach	STATE CA			

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
10/19/2016 	Greg Wohl <div style="background-color: gray; height: 20px; width: 100%;"></div> ID: _____	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Wohl Investments Co	1000.00
	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: _____