## **Late Contribution Report** NAME OF FILER Stop The Hidden Tax Committee No on C a coalition of Pacifica residents homeowners and property owners AREA CODE/PHONE NUMBER

(650) 381-9228

STREET ADDRESS

CITY

Pacifica

446 Old County Rd Ste 100 # 112

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

Date of

This Filing \_

Report No.

Amendment

No. of Pages 2

to Report No. (explain below)

09/29/2017

LCR-20170929

1/2

	LATE CONTRIBUTION REPORT			
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ITY CLERK	,			

## 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
09/29/2017	TFT Partners LLC  ID:	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		1000.00
1	ID:	IND COM OTH PTY SCC		
I	ID:	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		

IND - Individual PTY - Political Party COM - Recipient Committee (other than PTY or SCC) SCC - Small Contributor Committee OTH - Other
eason for Amendment:

I.D. NUMBER (if applicable)

STATE

CA

ZIP CODE

94044

1398189

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### **Late Contribution Report**

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NAME OF FILER Stop The Hidden Tax Committee No on C a coalition of Pacifica residents homeowners and property owners			Date of This Filing			CALIFORNIA Z 97
AREA CODE/PHONE	E NUMBER	I.D. NUMBER (if applicable)	Report No.			For Official Use Only
STREET ADDRESS			Amendment to Report No.			
CITY		STATE ZIP CODE	No. of Pages		2/2	
Late Contr	ibution(s) Made			<u> </u>		
DATE MADE	FULL NAME, MAILII	NG ADDRESS AND ZIP CODE OF RECIPIENT MMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	N	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
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Reason for Amenda	ment					

FPPC Form 497(June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC