Late Contrib	ution Report	Amoun	Type or print in ink ts may be rounded to w	hole dollars.			
NAME OF FILER Stop The Hidden Tax			Date of This Filing _	08/17/2017	RECEIVE DALIFORNIA 497		
AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable)				LCR-201708		r Official Use Only	
		1398189	Report No	LCR-201700	° AUG 17 2017	7	
CITY STATE ZIP CODE			Amendment to Report No		CITY CLERK		
CITY STATE ZIP CODE			No. of Pages	_2	1/2	1	
Late Contribu	tion(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	
08/16/2017	Thomas Thompson			IND     COM     OTH     PTY     SCC	Retired N/A	4000.00	
I	ID:			IND COM OTH PTY SCC			
	ID:			IND COM OTH PTY SCC			
*Contributor Codes IND - Individual COM - Recipient Co OTH - Other	mmittee (other than PTY or S	PTY - Political Party SCC) SCC - Small Contributor Commit	tee		. · · · · · · · · · · · · · · · · · · ·		

## To: Pacifica City Clerk

## Late Contribution Report

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

NAME OF THE P					LATE CONTRIBUTION REPORT	
NAME OF FILER Stop The Hidden Tax			Date of This Filing			
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1398189		Report No.		For Official Use Only	
STREET ADDRESS			Amendment to Report No.			
CITY	STATE	ZIP CODE	(explain below)  No. of Pages	2/2		

## Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)			
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	ID:	Ballot: Dist:					
Reason for Amendment:							

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