#### Late Contribution Report

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



ATE CONTRIBUTION REPORT

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			Date of This Filing	5/21/14	Date Stamp	CALIFO		
AREA CODE/PHONE NUM	MBER	I.D. NUMBER (if applicable	9		•	The state of the s		Official Use Only
707-273-8946		1362115		Report No	8	RECEIVED	101	Official OSE Offig
STREET ADDRESS		I		i,	•	NAME OF THE		
P.O. Box 6427				Amendment to Report No.		MAY 2 1 2014		
CITY		STATE	ZIPCODE	(explain below)		HUMBOLDT COUNTY		
Eureka		CA	95502	No. of Pages		ELECTIONS		
Late Contribut	tion(s) Received							
DATE RECEIVED	FULL NAME	, STREET ADDRESS AN (IF COMMITTEE, ALSO E	D ZIP CODE OF CONTRIBU NTER (.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMI (IF SELF-EMPLOYED, ENTER NAME OF	PLOYER BUSINESS)	AMOUNT RECEIVED
5/20/14	Neal Ewald 279 Westgate Drive Trinidad, CA 95570				IND COM OTH PTY	Senior Vice President Green Diamond Resources		1,000.00
		***************************************			scc			∑ Check if Loan
5/20/14	Hoopa Tribal Council P.O. Box 1348 Hoopa, CA 95546				OTH PTY			2,000.00
					□ scc			☐ Check if Loan
5/20/14	Robert McKee P.O. Box 400 Whitethorn, CA 9558	9			IND COM OTH PTY	Owner Whitethorn Construction		1,50000
					scc	30		☐ Check if Loan
OTH - Other	mmittee (other than PTY or a	SCC) SCC-S	olitical Party mall Contributor Committee					
		***************************************					EDD	C Form 497 ( lan/03)

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

			Amounts may	y be founded to w	note dollars.		497 CONTRIBUTION REPORT	Т
NAME OF FILER Elan Firpo for DA	Contract Con			Date of This Filing	5/13/14 EF	Date Stamp	CALIFORNIA 497	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 707-273-8946 1362115			Report No	7	RECEIVED	For Official Use Only		
STREET ADDRESS P.O. Box 6427				Amendmento Report No.		MAY 1 3 2014		
сітү Eureka		STATE CA	ZIP CODE 95502	(explain below)  No. of Pages	1	HUMBOLDT COUNTY ELECTIONS		
1. Contribution	n(s) Received	**			TO THE STREET OF THE STREET, WILLIAM STREET, S	and the second s		4
DATE RECEIVED	FULL NAME	STREET ADDRESS A	ND ZIP CODE OF CONTRIBU ENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMP (IF SELF-EMPLOYED, ENTER NAME OF E	PLOYER AMOUNT RECEIVED	_
5/13/14	Timothy Crowley 4801 West End Ro	d, Arcata, CA 95	521		IND     COM     OTH     PTY     SCC	Owner Northcoast Fabricators	1,000.00  Check if Loan  Provide interest rate	
5/13/14	Jaison Chand 1804 Ridgewood I	Orive, Eureka, 95	503	,	IND     COM     OTH     PTY     SCC	COO CAE	1,236.00  Check if Loan  Provide interest rate	5
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan  ———————————————————————————————————	
Reason for Amendm	ent:					**Contributor Codes  IND – Individual  COM – Recipient Comm  OTH – Other (e.g., bus  PTY – Political Party  SCC – Small Contribute	and the control of th	

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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



497 CONTRIBUTION REPORT

NAME OF FILER Elan Firpo for DA	2014			Date of This Filing	5/5/14	Date Stamp	CALIFO	
AREA CODE/PHONE NUM 707-273-8946		I.D. NUMBER (If applicable 1362115	(e)	Report No	4	RECEIVED	For	Official Use Only
P.O. Box 6427 CITY Eureka		STATE CA	ZIP CODE 95502	Amendmer to Report No. (explain below)		MAY - 5 2014 HUMBOLDT COUNTY ELECTIONS		
1. Contribution	n(s) Received				CONTRACTOR AND			
DATE RECEIVED	FULL NAMI	E, STREET ADDRESS AN (IF COMMITTEE, ALSO E	ND ZIP CODE OF CONTRIBU ENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF	PLOYER BUSINESS)	AMOUNT RECEIVED
5/5/14	Streamguys, Inc. 2212 Facory Creek Bayside, CA 95524				☐ IND☐ COM☐ OTH☐ PTY☐ SCC			1,000.00  Check if Loan  % Provide interest rate
5/5/14	Donald Banducci 1642 Baywood Land Bayside, CA 95524				IND     COM     OTH     PTY     SCC	Retired		1,000.00  Check if Loan  Provide interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan
Reason for Amendm	nent:					**Contributor Codes IND – Individual COM – Recipient Cor OTH – Other (e.g., bt PTY – Political Party SCC – Small Contrib	usiness enti	ty)

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497 CONTRIBUTION REPORT

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Elan Firpo for DA	2014			Date of This Filing	4/11/14	Julio Olamp	CALIFO	
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707-273-8946		1362115		Report No	<u> </u>	RECEIVED	, 0,	Similar Cod Siny
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P.O. Box 6427				to Report No.				
CITY		STATE	ZIP CODE	(explain below)	4	HUMBOLDT COUNTY ELECTIONS		3
Eureka		CA	95502	No. of Pages	<u> </u>			
1. Contribution	n(s) Received					- Control of the Cont		
DATE RECEIVED	FULL NAME	E, STREET ADDRESS AF (IF COMMITTEE, ALSO	ND ZIP CODE OF CONTRIBUTENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMI (IF SELF-EMPLOYED, ENTER NAME OF	PLOYER BUSINESS)	AMOUNT RECEIVED
4/11/14	Jaison Chand 1804 Ridgewood Eureka, CA 9550			=	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	COO City Ambulance		\$3,860.82  Check if Loan  **  Provide interest rate
,					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan  ———————————————————————————————————
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC			☐ Check if Loan  ———————————————————————————————————
Reason for Amendm	ent:					**Contributor Codes IND – Individual COM – Recipient Com OTH – Other (e.g., bu PTY – Political Party SCC – Small Contribu	siness entit	y)

#### Late Contribution Report

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



NAME OF FILER		The Mark Tax					LATE CO	NTRIBUTION REPOR
	trict Attorney 2014			Date of This Filing	3/31/2014	Date Stamp	CALIFO	DRNIA 407
AREA CODE/PHONE NUM	MBER	I.D. NUMBER (if applicable	9)				FOF	Market Charles and Market
707-273-8946		1362115		Report No	1	RECEIVED	For	Official Use Only
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P.O. Box 6427				Amendme to Report No.		MAR 3 1 2014		
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3/31/2014	Neal Ewald 279 Westgate Drive Trinidad, CA 95570				☑·IND □ COM □ OTH □ PTY □ SCC	Senior Vice President Green Diamond		5,000.00
		***************************************			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan
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*Contributor Codes IND – Individual COM – Recipient Com OTH – Other	mittee (other than PTY or S	PTY Po CC) SCC Sn	litical Party nall Contributor Committe	ee				Check if Loan
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	strict Attorney 2014			Date of This Filing	4/3/14	Date Stamp	CALIFO	
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707-273-8946		1362115	c)	Report No	2	RECEIVED	For	Official Use Only
STREET ADDRESS		1002110		1_		400		
P.O. Box 6427				Amendment to Report No.		APR - 3 2014		
CITY		STATE	ZIP CODE	(explain below)		HUMBOLDT COUNTY		
Eureka		CA	95502	No. of Pages		ELECTIONS		
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DATE RECEIVED	FULL NAME	E, STREET ADDRESS AN	ND ZIP CODE OF CONTRIBU ENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF	PLOYER BUSINESS)	AMOUNT RECEIVED
4/2/14	Dr. Mohd Awwad 3144 Broadway S Eureka CA 95501				IND     COM     OTH     PTY     SCC	Dentist Victoria Place Dental Cer	nter	1,000.00  Check if Loan  Provide interest rate
4/2/14	Elan Firpo P.O. Box 6427 Eureka, CA 9550	2			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deputy District Attorney County of Humboldt		3,000.00  Check if Loan  Provide interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan
Reason for Amendn	nent:					**Contributor Codes IND — Individual COM — Recipient Com OTH — Other (e.g., bu PTY — Political Party SCC — Small Contribu	siness entit	у)

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