

# 497 Contribution Report

Amounts may be rounded to whole dollars.

<b>NAME OF FILER</b> CHARLOTTE BRIMMER		<b>Date of This Filing</b> 11/15/2016	RECEIVED CITY CLERK	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> 310 245 5256	<b>I.D. NUMBER (if applicable)</b> 1389638	<b>Report No.</b> 4	NOV 16 PM 2:30	
<b>STREET ADDRESS</b> 683 LOYOLA STREET		<b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> CARSON	<b>STATE</b> CA	<b>ZIP CODE</b> 90746	CITY OF CARSON	
		<b>No. of Pages</b> 1		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET 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
11/14/2016	SOUTHERN CALIF PIPE TRADE [REDACTED]	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DISTRICT COUNCIL #16	2000.00 <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small>
11/14/2016	ANSCHUTZ SOUTHERN CA SPORTS COMPLEX [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUSINESS	1500.00 <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small>
		<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 _____% <small>Provide interest rate</small>

**\*\*Contributor Codes**

IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

Reason for Amendment: \_\_\_\_\_