

#415 P.001/001 06/06/2017 10:38

Received By
Dep. Town Clerk *R. Rivera*
Date 6/06/2017
Time 10:45
Town of Apple Valley

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER
No on Measure F/Apple Valley Taxpayers Against Higher Water Fees - Sponsored and Funded by Liberty Utilities

AREA CODE/PHONE NUMBER (916) 442-7757 **I.D. NUMBER (if applicable)** 1395364

STREET ADDRESS
455 Capitol Mall, Suite 600

CITY Sacramento **STATE** CA **ZIP CODE** 95814

Date of This Filing 06/06/2017

Report No. 259004-09

Amendment to Report No. _____
(explain below)

No. of Pages 1

Date Stamp

CALIFORNIA FORM 497
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1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET 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 |
|---------------|--|---|--|---|
| 06/05/2017 | Golden State Water Company 630 E. Foothill Blvd. San Dimas, CA 91773 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 7,095.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <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 _____% Provide interest rate |
| | | <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 _____% Provide interest rate |

*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: _____

From: