

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Valley Solutions: Assemblymember Adam Gray's Ballot Measure Committee			<b>Date of This Filing</b> <u>03/14/2019</u>	Date Stamp          Page 1 of 3	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 24px;">                     CALIFORNIA FORM 497                 </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (916)254-5180	<b>I.D. NUMBER</b> (if applicable) 1357548	<b>Report No.</b> <u>LCU-20181017-1</u>			
<b>STREET ADDRESS</b>  			<div style="background-color: black; color: white; padding: 2px;"> <input checked="" type="checkbox"/> <b>Amendment to Report No.</b> <u>001</u> </div> (explain below)		
<b>CITY</b> Sacramento	<b>STATE</b> CA	<b>ZIP CODE</b> 95814	<b>No. of Pages</b> <u>3</u>		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
09/24/2018	Morongo Band of Mission Indians Banning, CA 92220	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00
10/15/2018	PG&E Corporation San Francisco, CA 94105	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$20,000.00
10/09/2018	Pharmaceutical Research and Manufacturers of America California Initiative Fund Sacramento, CA 95814  ID# 1379198	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00

\*Contributor Codes

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

Reason for Amendment:  
Correct date of contribution made

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Valley Solutions: Assemblymember Adam Gray's Ballot Measure Committee			<b>Date of This Filing</b> _____ 03/14/2019 _____	Date Stamp          Page 2 of 3	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">                     CALIFORNIA FORM 497                 </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (916)254-5180	<b>I.D. NUMBER</b> (if applicable) 1357548	<b>Report No.</b> _____ LCU-20181017-1 _____			
<b>STREET ADDRESS</b>  _____			<input checked="" type="checkbox"/> <b>Amendment to Report No.</b> _____ 001 _____ (explain below)		
<b>CITY</b> Sacramento	<b>STATE</b> CA	<b>ZIP CODE</b> 95814	<b>No. of Pages</b> _____ 3 _____		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
10/12/2018	Philip Morris USA Inc. and its Affiliates Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

\*Contributor Codes

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

Reason for Amendment:  
Correct date of contribution made

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Valley Solutions: Assemblymember Adam Gray's Ballot Measure Committee			<b>Date of This Filing</b> <u>03/14/2019</u>	Date Stamp       Page 3 of 3	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 24px;">                     CALIFORNIA FORM 497                 </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (916)254-5180	<b>I.D. NUMBER</b> (if applicable) 1357548	<b>Report No.</b> <u>LCU-20181017-1</u>			
<b>STREET ADDRESS</b>  			<input checked="" type="checkbox"/> <b>Amendment to Report No.</b> <u>001</u> (explain below)		
<b>CITY</b> Sacramento	<b>STATE</b> CA	<b>ZIP CODE</b> 95814	<b>No. of Pages</b> <u>3</u>		

## 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)
10/17/2018	Yes 4 Children's Hospitals Yes on Proposition 4 sponsored by California Children's Hospital Sacramento, CA 95814  ID# 1401304	Children's Hospital Bond(4) Statewide Jurisdiction: Statewide	\$34,420.00	11/06/2018

Reason for Amendment:  
Correct date of contribution made