

Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER NATIONAL ASSOCIATION OF REALTORS			Date of This Filing _____ 08/07/2020	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
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 495189	Report No. _____ 08072020			
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY CHICAGO	STATE IL	ZIP CODE 60611	No. of Pages _____ 3		

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)
08/06/2020	YES ON 19: TAX SAVINGS AND HOUSING RELIEF FOR SENIORS, SEVERELY DISABLED, AND WILDFIRE VICTIMS SACRAMENTO, CA 95814 ID# 1400190 Memo Reference: EXP:S497:157	PROPOSITION 19 STATEWIDE	\$1,000,000.00	11/03/2020

Reason for Amendment:

Memo Reference: EXP:S497:157

CONTRIBUTION MADE FROM NONDONOR FUNDS (ADVERTISING AND BENEFITS PROGRAM INCOME)
