

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Neighbors for Affordable Housing and Open Space - No on B, Yes on C		Date of This Filing 06/05/2018	Date Stamp Filed Date: 06/05/2018 10:10 AM	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (408)966-1467	I.D. NUMBER (if applicable) 1401438	Report No. 25		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY San Jose	STATE CA	ZIP CODE 951254337		

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
6/5/2018	Greenbelt Alliance Initiative Fund [REDACTED] San Francisco CA 94108	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,280.00 <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

Reason for Amendment: _____

**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

497 Contribution Report Part1 (Continuation Sheet)

NAME OF FILER	I.D. NUMBER
Neighbors for Affordable Housing and Open Space - No on B, Yes on C	1401438
6/5/2018 - Greenbelt Alliance Initiative Fund - 1280.00 - last donation -- election day!	

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Neighbors for Affordable Housing and Open Space - No on B, Yes on C			Date of This Filing 06/05/2018	Date Stamp Filed Date: 06/05/2018 10:10 AM	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (408)966-1467	I.D. NUMBER (if applicable) 1401438		Report No. 25		
STREET ADDRESS [REDACTED]			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY San Jose	STATE CA	ZIP CODE 951254337	No. of Page 3		

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET 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)

Reason for Amendment: _____