

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> YES ON PROP 34, TAXPAYERS FOR PUBLIC SAFETY SPONSORED BY A COALITION OF JUSTICE ORGANIZATIONS			<b>Date of This Filing</b> _____ 08/27/2012 _____	Date Stamp          Page 1 of 4	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 24px;">                     CALIFORNIA FORM 497                 </div> For Official Use Only
AREA CODE/PHONE NUMBER ( ) - _____	I.D. NUMBER (if applicable) 1341187	<b>Report No.</b> _____ 201236 _____			
STREET ADDRESS   CITY STATE ZIP CODE SAN FRANCISCO CA 94104			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>No. of Pages</b> _____ 4 _____					

## 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
08/02/2012	JOHN STOIA SAN DIEGO, CA 92101  Memo Reference: 1	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY ROBBINS GELLER RUDMAN & DOWD LLP	\$5,000.00
08/02/2012	PATRICK DANIELS SAN DIEGO, CA 92101  Memo Reference: 2	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY ROBBINS GELLER RUDMAN & DOWD LLP	\$5,000.00
08/02/2012	PATRICK COUGHLIN SAN DIEGO, CA 92101  Memo Reference: 3	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY ROBBINS GELLER RUDMAN & DOWD LLP	\$20,000.00

\*Contributor Codes

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

Reason for Amendment:



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AREA CODE/PHONE NUMBER ( ) -	I.D. NUMBER (if applicable) 1341187	<b>Report No.</b> <u>201236</u>	Page 3 of 4		
STREET ADDRESS			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
CITY SAN FRANCISCO	STATE CA	ZIP CODE 94104	<b>No. of Pages</b> <u>4</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)

Reason for Amendment:

Memo Reference: 1

Occupation and employer info was obtained by 8/24/12. Check deposited on 8/24/12.

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Memo Reference: 2

Occupation and employer info was obtained by 8/24/12. Check deposited on 8/24/12.

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Memo Reference: 3

Occupation & employer info was obtained by 8/24/12. Check deposited on 8/24/12.

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Memo Reference: 4

Occupation & employer was obtained by 8/24/12. Check deposited on 8/24/12.

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