

497 Contribution Report

Amounts may be rounded to whole dollars.

FILED

497 CONTRIBUTION REPORT

NAME OF FILER Committee for a Responsible Napa County, No on Measure D 2018		Date of This Filing 05/02/2018 Date Stamp Napa County Assessor-Recorder-County Clerk Election Division	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (707) 294-2775	I.D. NUMBER (if applicable) 1405028	Report No. 279201-04 MAY 2 2018 By: <i>[Signature]</i> Deputy	
STREET ADDRESS 1485 Main Street, Suite 205		Amendment to Report No. (explain below)	
CITY St. Helena	STATE CA	ZIP CODE 94574	
		No. of Pages 1	

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
05/01/2018	Amalia B. Palmas 610 E. Market Street, Unit 3303 San Antonio, TX 78205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Self-Employed	20,000.00 <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