

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER No on S, Lemon Grove Neighbors Against the Lifetime Tax		Date of This Filing 02/09/2020	RECEIVED FEB 10 2020 CITY CLERK	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1422743	Report No. 04		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Lemon Grove	STATE CA	ZIP CODE 91945		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/09/2020	Mary England [REDACTED] La Mesa, CA 91942-2044	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$2,000.00 <input type="checkbox"/> Check / Loan <small>Other (Please Specify)</small>

Reason for Amendment:

\*\*Contributor Codes:  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other (e.g. business entity)  
 PTY - Political Party

FPPC Form 497 (March 2011)  
 FPPC Toll-Free Helpline: 866/ASK-FPPC