

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER George Martinez for Santa Cruz County Office of Education-Area I-2010		Date of This Filing 10/22/2010	Filing Date Stamp SANTA CRUZ CO. ELECTIONS	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 831-469-9317	I.D. NUMBER (if applicable) 1331029	Report No. 1	10 OCT 22 PM 1:39	
STREET ADDRESS 584 Swanton Road		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages 1	
CITY Davenport	STATE CA	ZIP CODE 95017		

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
10/21/2010	Small Contributor Committee, CFT COPE ID#741857 California Federation of Teachers, AFT, AFL-CI Burbank, CA 91505	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$1,000.00 <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

No. 1128 P. 2

Oct. 22. 2010 1:28PM