

497 Contribution Report

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

NAME OF FILER <i>YES on A, SCOTTS VALLEY</i>	Date of This Filing <i>5/8/14</i>	FILED SANTA CRUZ CO ELEC CALIFORNIA 497 For Official Use Only 2014 MAY -8 AM 9:51	I.D. NUMBER (if applicable) <i>1366263</i>
AREA CODE/PHONE NUMBER <i>931 438 4513</i>	Report No. <i>3</i>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)
CITY STATE ZIP CODE <i>SCOTTS VALLEY CA 95066</i>	No. of Pages <i>1</i>		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET 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
<i>5/8/14</i>	<i>SCOTT & DENISE SUTER SCOTTS VALLEY, CA 95066-3238</i>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>Vice President, SALES GROUPWARE TECHNOLOGIES</i>	<i>82,500.⁰⁰</i> <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