

Late Contribution Report

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

RECEIVED DATE CONTRIBUTION REPORT

NAME OF FILER Residents for Yes on V		Date of This Filing 10/24/2006	Date Stamp 2006 OCT 24 PM 2:01	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 949-858-7448	I.D. NUMBER (If applicable) 1289607	Report No. 1	OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH	
STREET ADDRESS 1821 Mariners Drive		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Newport Beach, CA	STATE CA	ZIP CODE 92660	No. of Pages 2	

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
10/24/2006	Newport Banning Ranch LLC 702 Oberlin Rd Ste 150 Raleigh, NC 27605	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

***Contributor Codes**

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

Reason for Amendment: _____