## 497 Contribution Report

## Amounts may be rounded to whole dollars.

NAME OF FILER				<u></u>	497 CONTRIBUTION REPORT
			Date of	Date Stamp	GALIFORNIA A A A
CBD, Inc			This Filing 10/14/2016	received via	HORN HALL
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable	e)	· Washington or a second of the second of th	0	For Official Use Only
(949)784-9032	STATE OF THE STATE		Report No. 2016-5MD	tax 10/14/16	in de Daniele Dee Origi
STREET ADDRESS	d		the product of the	+-	NA VARIABLE
3023 Orange Ave			☐ Amendment to Report No.	J. F.	amanumar delegation
CITY	STATE	ZIP CODE	(explain below)		
Santa Ana	CA	92707	No. of Pages	A V and department for the second sec	er som over the source of the

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTERLD, NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/14/2016	Yes on Measure W Committee, Major Funding by CBD Inc. (ID# 1330927) 2973 Harbor Blvd, Suite 151 Costa Mesa, CA 92626	Safe Access: 4 Licensed Medical Marijuana Businesses W Costa Mesa	40,000-00	11/08/2016
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Reason for Amendment:	