

# 497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

**NAME OF FILER**  
ACCESS FOR ALL, YES ON I, NO ON J, SPONSORED BY CORPORATION OF THE FINE ARTS MUSEUMS AND OPEN THE GREAT HIGHWAY ALLIANCE

AREA CODE/PHONE NUMBER      I.D. NUMBER (*if applicable*)  
(415) 732-7700      1449299

STREET ADDRESS

CITY      STATE      ZIP CODE  
SAN FRANCISCO      CA      94108

Date of  
This Filing 10/03/2022

Date Stamp

Report No. G22-AFA-07

E-Filed  
10/04/2022  
12:59:00

Amendment  
to Report No. \_\_\_\_\_  
(explain below)

Filing ID:  
204981560

No. of Pages 1

**CALIFORNIA FORM 497**

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## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *  <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/03/2022	CORPORATION OF THE FINE ARTS MUSEUMS SAN FRANCISCO, CA 94118	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		75,000.00  <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