

Late Contribution Report

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

RECEIVED

LATE CONTRIBUTION REPORT

NAME OF FILER
Frank & Sal Gusella

AREA CODE/PHONE NUMBER
323-656-3997

I.D. NUMBER (if applicable)
900271

STREET ADDRESS
8226 W-Norton Ave #12

CITY STATE ZIP CODE
West Hollywood CA 90046

Date of This Filing
1-24-07

Report No.
S-1

Amendment to Report No. _____
(explain below)

No. of Pages
1

CITY OF WEST HOLLYWOOD
07 JAN 24 PM 4: 04
OFFICE OF THE CITY CLERK

CALIFORNIA FORM 497
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Late 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
<i>1-24-07</i>	<i>Heidi Cortese 218 Marigold Ave Corona Del Mar, CA 92628</i>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>PCC Inc dba Lensure Hill Chairman</i>	<i>1,000.00</i> <input type="checkbox"/> Check if Loan
		<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
		<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

*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

Reason for Amendment: *\$1,000.00 within 24 hrs of Receipt*