

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars. **RECEIVED**
CITY OF WEST HOLLYWOOD LATE CONTRIBUTION REPORT

NAME OF FILER Committee to Elect Patricia Nell Warren		Date of This Filing 02/27/2007	Date Stamp 07 FEB 27 PM 2: 14	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 323-966-2-65	I.D. NUMBER (if applicable) 1293283	Report No. 0227-SX	OFFICE OF THE CITY CLERK	
STREET ADDRESS 7985 Santa Monica Blvd., 109-408		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY West Hollywood, CA	STATE CA	ZIP CODE 90046	No. of Pages 1	

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO SET I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/26/2007	Patricia Nell Warren 8306 Wilshire Blvd #8306 Beverly Hills, CA 90211	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Writer/Publisher Same Date	3,000.00 <input type="checkbox"/> xx Check if Loan
02/27/2007	Patricia Nell Warren 8306 Wilshire Blvd #8306 Beverly Hills, CA 90211	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Writer/Publisher Same Date	1,000.00 <input type="checkbox"/> xx 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: _____