

Late Contribution Report

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

RECEIVED
CITY OF WEST HOLLYWOOD CONTRIBUTION REPORT

Date Stamp
07 FEB 13 AM 9:

CALIFORNIA FORM 497
For Official Use Only

OFFICE OF THE CITY CLERK

NAME OF FILER
ED BUCK FOR COUNCIL

AREA CODE/PHONE NUMBER
323 848-9881

I.D. NUMBER (if applicable)
1292718

STREET ADDRESS
1234 N. LAUREL AVE. # 17

CITY WEST HOLLYWOOD **STATE** CA **ZIP CODE** 90046

Date of This Filing Feb 12 07

Report No. 2

Amendment to Report No. _____
(explain below)

No. of Pages 1

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
Feb 09 2007	Seth Kengliak 11027 wedding st No Hollywood CA 91601	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	owner. 5 guys named me	\$1000 <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 PTY - Political Party
COM - Recipient Committee (other than PTY or SCC) SCC - Small Contributor Committee
OTH - Other (e.g., business entity)

Reason for Amendment: _____