

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER <i>Friends of Jim Prola</i>		Date of This Filing <i>05/29/08</i>	Date Stamp <b>CITY OF SAN LEANDRO</b>  <b>MAY 29 2008</b> <b>CITY CLERK'S OFFICE</b>	<b>CALIFORNIA FORM 497</b> <small>For Official Use Only</small>
AREA CODE/PHONE NUMBER <i>510-483-0744</i>	I.D. NUMBER (if applicable) <i>1302553</i>	Report No. <i>002</i>		
STREET ADDRESS <i>2234 Belvedere Avenue</i>		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>		
CITY <i>San Leandro, CA</i>	STATE <i>CA</i>	ZIP CODE <i>94577</i>	No. of Pages <i>1</i>	

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
<i>05/29/08</i>	<i>Service Employees International Union Local 1021 555 Capitol Mall, Suite 1425 Sacramento, CA 95814 ID# 1296948</i>	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<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	PTY – Political Party
COM – Recipient Committee (other than PTY or SCC)	SCC – Small Contributor Committee
OTH – Other (e.g., business entity)	

Reason for Amendment: \_\_\_\_\_