

497 Contribution Report

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

RECEIVED
CITY OF WEST HOLLYWOOD
497 CONTRIBUTION REPORT

NAME OF FILER Mayor Jeffrey Prang Committee		Date of This Filing 2-17-09	Date Stamp 09 FEB 17 PM 5:2	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER 323-654-8433	ID NUMBER (if applicable) 970426	Report No. 6	OFFICE OF THE CITY CLERK For Official Use Only	
STREET ADDRESS 7985 Santa Monica Bl. # 590		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY West Hollywood	STATE CA	ZIP CODE 90046	No. of Pages 1	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
2-17-09	James Hotel West Hollywood, LLC 11 E. 26 St, 4th FLR New York, NY 10010	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
2-17-09	Abbey Rest + Bars USA-LA LLC 7966 Beverly Blvd Los Angeles, 90048	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
2-17-09	SBE Entertainment Group, LLC 8000 Beverly Blvd Los Angeles, 90048	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <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