

# Late Contribution Report

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

NAME OF FILER Bernard Parks for Supervisor		Date of This Filing 06/02/2008	Date Stamp Los Angeles 2008 JUN - 2 PM 4:43 Campaign Finance Disclosure Section 1/4	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (323) 655-4065	I.D. NUMBER (if applicable) 1300289	Report No. LCR-80602		
STREET ADDRESS 6380 Wilshire Blvd., #1612		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>		
CITY Los Angeles	STATE CA		ZIP CODE 90048	
No. of Pages 4				

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
06/02/2008 	James R. Allen  ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CFO  n/a	1000.00
06/02/2008 	Bell Cab Management  ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00
06/02/2008 	Ivy Oi-Wa-Mui Chu  ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner  Hollywood Park Casino	1000.00

\*Contributor Codes  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

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

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AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1300289	Report No. _____	2008 JUN - 2 PM 4:43	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	Campaign Finance Disclosure Section	
CITY	STATE	ZIP CODE	No. of Pages _____ 2/4	

## Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
1	ID:	Ballot: Dist:		
1	ID:	Ballot: Dist:		
1	ID:	Ballot: Dist:		
1	ID:	Ballot: Dist:		

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

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NAME OF FILER Bernard Parks for Supervisor		Date of This Filing _____	Received by Los Angeles County 2008 JUN - 2 PM 4:43 Campaign Finance Disclosure Section 3/4	LATE CONTRIBUTION REPORT <b>CALIFORNIA FORM 497</b> For Official Use Only	
AREA CODE/PHONE NUMBER	ID. NUMBER (if applicable) 1300289	Report No. _____			
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)			
CITY	STATE	ZIP CODE		No. of Pages _____	

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
06/02/2008 	Leo Yu-Mina Chu  ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner  Hollywood Park Casino	1000.00
06/02/2008 	Sylvia E. CHukuani  ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Info  n/a	1000.00
06/02/2008 	Felicia Ekeke  ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director  CA Professional Education & Counsel	1000.00

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

PAGE 04/04  
 PADILLA & ASSOCIATES  
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STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY	STATE	ZIP CODE	

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06/02/2008 	Cheryl D. Lewis  Gardena ID: _____	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President  Inglewood Park Cemetery	1000.00
06/02/2008 	Debra L. McNeill  ID: _____ Ref: □	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bookkeeper  KinSmith Financial	1000.00

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