

Late Contribution Report

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

CITY OF SUNNYVALE, CA LATE CONTRIBUTION REPORT

NAME OF FILER <i>Sunnyvale Public Safety Officers Assn. PAC</i>		Date of This Filing 10-30-03	CITY OF SUNNYVALE, CA OFFICE Date Stamp 2003 OCT 30 3:12	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER <i>(408) 736-7191</i>	I.D. NUMBER (if applicable) <i>99-0921</i>	Report No. <i>Contrib-1</i>		
STREET ADDRESS <i>469 E. Evelyn Ave. P.O. Box 60372</i>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <i>Sunnyvale</i>	STATE <i>CA</i>	ZIP CODE <i>94088</i>	No. of Pages <i>1</i>	

Late Contribution(s) Made

DATE MADE	FULL NAME, STREET 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)
<i>10-29-03</i>	<i>Committee to Elect James C Fussell 454 Molino Avenue Sunnyvale CA 94086 ID# 1258204</i>	<i>City Council Seat 5</i>	<i>\$ 1000. -</i>	<i>11-4-03</i>

Reason for Amendment: _____

Late Independent Expenditure Report

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LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER <i>Sunnyvale Public Safety officers Assn. PAC</i>		Date of This Filing <i>10.30.03</i>	Date Stamp	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER <i>(408) 736-7191</i>	I.D. NUMBER (Applicable) <i>99-092-1</i>	Report No. <i>IND 2</i>		
STREET ADDRESS <i>469 E. Evelyn Ave. P.O. Box 60372</i>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <i>Sunnyvale</i>	STATE <i>CA</i>	ZIP CODE <i>94088</i>	No. of Pages <i>1</i>	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED <i>Committee to Elect James C. Fussell</i>				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD <i>City Council Seat 5</i>	DISTRICT NO.	SUPPORT <i>X</i>	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
<i>10.24.03</i>	<i>mailing</i>	<i>180.</i>

Reason for Amendment: *Our late contribution (Contrib-1) put us over the \$1000. level for this candidate.*

Sunnyvale Public Safety Officers Association
P.O. Box 60372
Sunnyvale, CA 94088
(408) 736-7191
fax (408) 522-1572



Fax

To: City Clerk's Office

From: Sunnyvale Public Safety Officers Assoc.

Fax: 408-730-7596

Pages: 3

Phone: 408-730-7474

Date: October 30, 2003

Re: Late reporting

CC:

- Urgent
- For Review
- Please Comment
- Please Reply
- Please Recycle

● Comments:

*Steve Gisk would like copies of
this weeks 496 + 497's, is that an
option? let me know.*

Alison

cell 214.1604