

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER Friends of Anthony(Tony)Spitaleri Sunnyvale Council Seat #1 2009		Date of This Filing 10/23/2009	Date Stamp CITY CLERK'S OFFICE 2009 OCT 23 P 12: 22	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 650- 444-8379	I.D. NUMBER (if applicable) 1271060	Report No. 1 A		
STREET ADDRESS [REDACTED]		<input checked="" type="checkbox"/> Amendment to Report No. 10/17/2009 (explain below)		
CITY Sunnyvale	STATE Ca	ZIP CODE 94086	No. of Pages 1	

1. 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
10/23/2009	South Bay AFL-CIO Labor Council COPE [REDACTED] San Jose, California 95125 FPPC#744711	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2307.82 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<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 _____% Provide interest rate
		<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 _____% Provide interest rate

Reason for Amendment: Mailers, supplies, data and food for volunteers from 10/13 thru 10/17/2009

*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

Patricia Castillo 10/23/2009

FPPC Form 497 (November/07)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)