

# Late Contribution Report

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

NAME OF FILER  
Jeffrey Prang for Assessor 2018

AREA CODE/PHONE NUMBER  
(323) 655-4065

I.D. NUMBER (if applicable)  
1396928

STREET ADDRESS

CITY STATE ZIP CODE  
Encino CA 91436

Date of This Filing 05/16/2018

Report No. LCR-20180515

Amendment to Report No. \_\_\_\_\_  
(explain below)

No. of Pages 2

RECEIVED BY DATE CONTRIBUTION REPORT  
LOS ANGELES CALIFORNIA  
2018 MAY 16 PM 4:24 For Official Use Only  
FORM 497  
CAMPAIGN FINANCE  
1/2

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING 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
05/15/2018	United Food & Commercial Workers International Union  Washington DC 20006 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1500.00
	ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
	ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

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

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