

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER <i>Tom Selinske</i>		Date of This Filing <i>3/7/11</i>	RECEIVED 11 MAR -7 P12 22 CITY CLERK CITY OF PASADENA	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER <i>626-233-4257</i>	I.D. NUMBER (if applicable) <i>1292746</i>	Report No. <i>2</i>		
STREET ADDRESS <i>984 E. Topoka Street</i>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <i>Pasadena</i>	STATE <i>CA</i>	ZIP CODE <i>91104</i>		

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
<i>3/5/11</i>	<i>California Laborers for Equality & Progress 4399 Santa Anita Avenue, Ste 204 El Monte, CA 91731</i>	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<i>\$1000⁰⁰</i> <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: _____

*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