

497 Contribution Report

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

497 CONTRIBUTION REPORT

CITY CLERK

Date Stamp

NAME OF FILER
MARY BOGER FOR SCHOOL BOARD 2011 *GLENDAL*

AREA CODE/PHONE NUMBER
(818) 247-4798

I.D. NUMBER (if applicable)
014748 1337929

STREET ADDRESS
1601 CAPISTRANO AVENUE

CITY STATE ZIP CODE
GLENDAL CA 91208

Date of This Filing
MAR. 23, 2011

Report No.
2011-1

Amendment to Report No. _____
(explain below)

No. of Pages _____

APR 21 PM 4:26

CALIFORNIA FORM 497

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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
MAR. 22, 2011	ADAM SCHIFF FOR CONGRESS FEC # C 00343871 c/o KAUFMAN LEGAL GROUP 777 S. FIGUEROA ST., STE. 4050 LOS ANGELES, CA 90017	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 1,000.00 <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