497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER		Date of	09/19/2014	Pale Stamp	CALIFO			
CITIZENS FOR YES ON MEASURE B				This Filing	007.107.207.1		FO	am State
AREA CODE/PHONE NUMBER		I.D. NUMBER (it applicable)		Report No	1		For	Official Use Only
209-998-2240 1368436				- Keport 110:		SEP 1 9 2014		
STREET ADDRESS		☐Amendment						
701 E. CANAL DE		to Report No. (explain below)		Office of the				
:ITY		STATE ZIP CODE		No. of Pages	2	City Clerk		
TURLOCK		CA	95380	No. of Fages				
1. Contribution	n(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF	AMOUNT RECEIVED	
08/11/2014	A. TEICHERT \$ S P.O. BOX 15002 SACRAMENTO, C			☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC			2500.00 Check if Loan Provide interest rate	
08/15/2014	NORTHERN CALI ISSUES PAC ID# 1273648 555 CAPITAL MAI SACRAMENTO, C	CT COUNCIL OF LAE	BORERS	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC			1000.00 Check if Loan % Provide interest rate	
08/25/2014	TURLOCK SCAVE P.O. BOX 1865 TURLOCK, CA 95				☐ IND☐ COM☐ OTH☐ PTY☐ SCC	·		1000.00 Check if Loan Rrovide interest rate
Reason for Amendm	ent:					**Contributor Codes IND — Individual COM — Recipient Com OTH — Other (e.g., bu PTY — Political Party SCC — Small Contribu	siness entit	у)

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497 CONTRIBUTION REPORT

NAME OF FILER CITIZENS FOR YES ON MEASURE B				Date of O9/19/2014 This Filing		Date Stamp	california 497	
AREA CODE/PHONE NUMBER		I.D. NUMBER (if applicable)		Report No1			For Official Use Only	
209-998-2240 1368436			Report No.					
STREET ADDRESS		☐ Amendment						
701 E. CANAL DRIVE				to Report No.				
CITY	STATE ZIP CODE			(explain below) No. of Pages2				
TURLOCK	OCK CA 95380							
1. Contribution	n(s) Received							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			JTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		AMOUNT RECEIVED
08/22/2014	TURLOCK WALN 400 D STREET TURLOCK, CA 9			IND COM SCC			1000.00 Check if Loan **Provide interest rate**	
09/18/2014	REALTORS ALLI ID#1226192 16980 S. HARLA LATHROP, CA 9	PER PLANNING		☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC			5000.00 Check if Loan % Provide interest rate	
09/19/2014	NORTHERN CAL REGIONAL COU ID# 1219354 265 HEGENBER OAKLAND, CA 9	NCIL ISSUES KE GER ROAD, SUI	PAC		☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC			5000.00 Check if Loan Rrovide interest rate
Reason for Amendn	nent:					**Contributor Codes IND — Individual COM — Recipient Cr OTH — Other (e.g., PTY — Political Part SCC — Small Contri	business enti tv	ty)