

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER John Buckland		Date of This Filing 10/26/2018	Date Stamp OCT 26 2018 RECEIVED	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 530 674-8835	I.D. NUMBER (if applicable) 1331210	Report No. 3		
STREET ADDRESS 1478 La Grande Avenue		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Yuba City	STATE CA	ZIP CODE 95991	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
10/25/2018	John and Patricia Buckland 1478 La Grande Avenue Yuba City, CA 95991	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Self Employed	10000.00 <input checked="" type="checkbox"/> Check if Loan 0.0 % 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

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NAME OF FILER John Buckland for Council 2018		Date of This Filing <u>10/2/2018</u>	Date Stamp	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER 530 674-8835	I.D. NUMBER (if applicable) 1331210	Report No. <u>2</u>	CITY CLERK OCT 02 2018 YUBA CITY	
STREET ADDRESS 1478 La Grande Avenue		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>	No. of Pages <u>1</u>	
CITY Yuba City	STATE CA	ZIP CODE 95991		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
10/01/2018	The Fletcher Family LTD Partnership 446 Brown Avenue Yuba City, CA 95991	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3000.00 <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

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CALIFORNIA FORM 497 For Official Use Only		Date Stamp ADMINISTRATION AUG 28 2018 RECEIVED
NAME OF FILER John Buckland for Council 2018		Date of This Filing 8/28/2018
AREA CODE/PHONE NUMBER 530 674-8835	I.D. NUMBER (if applicable) 1331210	Report No. 1
STREET ADDRESS 1478 La Grande Avenue		<input type="checkbox"/> Amendment to Report No. (explain below)
CITY Yuba City	STATE CA	No. of Pages 1
ZIP CODE 95991		

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
7/25/2018	Michael and Theresa Tomlinson 3 Oak Hollow Yuba City, CA 95991	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor/Real Estate	500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
8/27/2018	Michael and Theresa Tomlinson 3 Oak Hollow Yuba City, CA 95991	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor/Real Estate	500.00 <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

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