

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED
CITY OF YUBA CITY
HUMAN RESOURCES

Date Stamp
2018 OCT 23 PM 4: 2

CALIFORNIA FORM **497**

For Official Use Only

NAME OF FILER
Brad Westmoreland for Yuba City Council 2018

AREA CODE/PHONE NUMBER
(916) 917-7604

I.D. NUMBER (if applicable)
1408018

STREET ADDRESS
1085 Courtyard Drive

CITY STATE ZIP CODE
Yuba City CA 95991

Date of This Filing 10/23/18

Report No. 1

Amendment to Report No. _____
(explain below)

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
10/22/18	Operating Engineers Local Union No, 3 District 60 PAC ID #891400 1620 South Loop Road Alameda, CA 94502	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Total for 2018 = \$1464.37	\$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
		<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