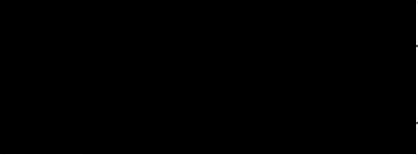


**COPY**

**496 Independent Expenditure Report**

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

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Chico Citizens for Accountable Government, supporting the election of Fillmer, Sorensen and Coolidge for Chico City Council 2014		Date of This Filing <u>10/29/2014</u>	Date Stamp	<b>CALIFORNIA FORM 496</b> For Official Use Only
AREA CODE/PHONE NUMBER 	I.D. NUMBER (if applicable) 1372718	Report No. <u>2014-17</u>	<b>RECEIVED</b> <b>OCT 30 2014</b> CITY CLERK CITY OF CHICO	
STATE Chico	ZIP CODE CA 95926	<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
		No. of Pages <u>1</u>		

**1. List Only One Candidate or Ballot Measure**

NAME OF CANDIDATE SUPPORTED OR OPPOSED Mark Sorensen				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: Cty of Chico	DISTRICT NO.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

**2. Independent Expenditures Made** *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/28/2014	Direct Mail piece Cumulative to date total \$9347.32	1,327.16

Reason for Amendment: \_\_\_\_\_

**COPY**

**496 Independent Expenditure Report**

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

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Chico Citizens for Accountable Government, supporting the election of Fillmer, Sorensen and Coolidge for Chico City Council 2014		Date of This Filing <u>10/29/2014</u>	Date Stamp	<b>CALIFORNIA FORM 496</b> For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1372718	Report No. <u>2014-18</u>	<b>RECEIVED</b> <b>OCT 30 2014</b> <b>CITY CLERK</b> <b>CITY OF CHICO</b>	
CITY Chico	STATE CA	ZIP CODE 95926	<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
			No. of Pages <u>1</u>	

**1. List Only One Candidate or Ballot Measure**

NAME OF CANDIDATE SUPPORTED OR OPPOSED Reanette Fillmer				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: City of Chico	DISTRICT NO.	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>

**2. Independent Expenditures Made** Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/28/2014	Direct Mail piece Cumulative to date total \$9347.32	1,327.16

Reason for Amendment: \_\_\_\_\_

**COPY**

**496 Independent Expenditure Report**

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

496 INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Chico Citizens for Accountable Government, supporting the election of Fillmer, Sorensen and Coolidge for Chico City Council 2014		<b>Date of This Filing</b> 10/29/2014	<b>RECEIVED</b> OCT 30 2014 CITY CLERK CITY OF CHICO	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1372718	<b>Report No.</b> 2014-19		
<b>CITY</b> Chico	<b>STATE</b> CA	<b>ZIP CODE</b> 95926		

**1. List Only One Candidate or Ballot Measure**

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> Andrew Coolidge				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD</b> City Council Member: City of Chico	<b>DISTRICT NO.</b>	<b>SUPPORT</b> X	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

**2. Independent Expenditures Made** Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/28/2014	Direct Mail piece Cumulative to date total \$9347.34	1,327.17

Reason for Amendment: \_\_\_\_\_