

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>10/30/2014</u> | Date Stamp RECEIVED OCT 31 2014 CITY CLERK CITY OF CHICO | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1372718 | Report No. <u>2014-20</u> | | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small> | | |
| CITY Chico | STATE CA | ZIP CODE 95926 | | |

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 <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 |
|------------|--|--------|
| 10/29/2014 | Direct Mail piece Cumulative to date total \$10783.12 | 681.08 |
| 10/29/2014 | Direct Mail piece Cumulative to date total \$10783.12 | 754.72 |
| | | |
| | | |

Reason for Amendment: _____

496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

CALIFORNIA FORM 496
 I.D. NUMBER (if applicable)
 1372718

NAME OF FILER
 Chico Citizens for Accountable Government, supporting the election of Fillmer, Sorensen and Coolidge for Chico City Council 2014

3. Contributions of \$100 or More 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 | INTEREST RATES |
|---------------|---|---|---|-----------------|---|
| 10/29/2014 | 4-C Land & Farming Co., Inc. dba C&C Storage, Bill Chance Realty [REDACTED] | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 500.00 | If loan, enter interest rate, if any _____% |
| 10/29/2014 | Pamela J. Schultz [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate Sales Pam Schultz (Self-Employed) | 5,000.00 | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

**Contributor Codes
 IND – Individual
 COM – Recipient Committee (other than PTY or SCC)
 OTH – Other
 PTY – Political Party
 SCC – Small Contributor Committee

FPPC Form 496 (March/2011)
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1372718 | Report No. <u>2014-21</u> | | |
| CITY Chico | STATE CA | ZIP CODE 95926 | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | |
| | | No. of Pages <u>2</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 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 |
|------------|--|--------|
| 10/29/2014 | Direct Mail piece Cumulative to date total \$10783.13 | 681.08 |
| 10/29/2014 | Direct Mail piece Cumulative to date total \$10783.13 | 754.73 |
| | | |
| | | |

Reason for Amendment: _____

496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

CALIFORNIA FORM 496

I.D. NUMBER (if applicable)

1372718

NAME OF FILER
Chico Citizens for Accountable Government, supporting the election of Fillmer, Sorensen and Coolidge for Chico City Council 2014

3. Contributions of \$100 or More 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 | INTEREST RATES |
|---------------|---|---|---|-----------------|--|
| 10/29/2014 | 4-C Land & Farming Co., Inc. dba C&C Storage, Bill Chance Realty [REDACTED] | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 500.00 | If loan, enter interest rate, if any _____% |
| 10/29/2014 | Pamela J. Schultz [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate Sales Pam Schultz (Self-Employed) | 5,000.00 | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |

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****Contributor Codes**
IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 496 (March/2011)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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496 INDEPENDENT EXPENDITURE REPORT

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| 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>10/30/2014</u> | Date Stamp RECEIVED OCT 31 2014 CITY CLERK CITY OF CHICO | CALIFORNIA FORM 496 For Official Use Only |
| I.D. NUMBER (if applicable) 1372718 | Report No. <u>2014-22</u> | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Chico | STATE CA | ZIP CODE 95926 | No. of Pages <u>2</u> | |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|--|---------------------|---|---|--|---------------------|--|---|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Andrew Coolidge | | | | 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 |
|------------|--|--------|
| 10/29/2014 | Direct Mail piece Cumulative to date total \$10783.13 | 681.07 |
| 10/29/2014 | Direct Mail piece Cumulative to date total \$10783.13 | 754.72 |
| | | |
| | | |

Reason for Amendment: _____

496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

CALIFORNIA FORM 496

I.D. NUMBER (If applicable)

1372718

NAME OF FILER
Chico Citizens for Accountable Government, supporting the election of Fillmer, Sorensen and Coolidge for Chico City Council 2014

3. Contributions of \$100 or More 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 | INTEREST RATES |
|---------------|---|---|---|-----------------|---|
| 10/29/2014 | 4-C Land & Farming Co., Inc. dba C&C Storage, Bill Chance Realty <div style="background-color: black; width: 100px; height: 20px; margin-top: 5px;"></div> | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 500.00 | If loan, enter interest rate, if any _____% |
| 10/29/2014 | Pamela J. Schultz <div style="background-color: black; width: 100px; height: 20px; margin-top: 5px;"></div> | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate Sales Pam Schultz (Self-Employed) | 5,000.00 | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |

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497 Contribution Report

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

497 CONTRIBUTION 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 10/30/2014 | Date Stamp RECEIVED OCT 31 2014 CITY CLERK CITY OF CHICO | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER (916) 686-1815 | I.D. NUMBER (if applicable) 1372718 | Report No. 2014-23 | | |
| STREET ADDRESS 1380 East Avenue, Ste. 135-258 | | <input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small> | | |
| CITY Chico | STATE CA | ZIP CODE 95926 | No. of Pages 1 | |

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 |
|---------------|--|---|--|---|
| 10/29/2014 | Pamela J. Schultz [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate Sales Pam Schultz (Self-Employed) | 5,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| 10/30/2014 | MJ Shelton General Engineering, Inc. [REDACTED] | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" 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 |

*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

Reason for Amendment: _____