

**COPY**

**497 Contribution Report**

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

497 CONTRIBUTION 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> <u>10/28/2014</u>	<b>Date Stamp</b>  <b>RECEIVED</b>  <b>OCT 29 2014</b>  <b>CITY CLERK</b> <b>CITY OF CHICO</b>	<b>CALIFORNIA FORM 497</b>  For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> [REDACTED]	<b>I.D. NUMBER (if applicable)</b> 1372718	<b>Report No.</b> <u>2014-15</u>		
<b>STREET ADDRESS</b> [REDACTED]		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Chico	<b>STATE</b> CA	<b>ZIP CODE</b> 95926	<b>No. of Pages</b> <u>1</u>	

**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
10/27/2014	Patrick Conroy [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Contractor Conroy Construction Inc.	1,000.00  <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/27/2014	Franklin Construction, inc. [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00  <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: \_\_\_\_\_

**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> <u>10/28/2014</u>	<b>Date Stamp</b> <b>RECEIVED</b> <b>OCT 29 2014</b> <b>CITY CLERK</b> <b>CITY OF CHICO</b>	<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> <u>2014-16</u>		
<b>CITY</b> Chico		<b>STATE</b> CA	<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)	
<b>ZIP CODE</b> 95926		<b>No. of Pages</b> <u>2</u>		

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

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> Scott Gruendl				<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>	<b>OPPOSE</b> X	<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
10/27/2014	Direct Mail piece Cumulative to date total \$3981.49	3,981.49

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

# 496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

<b>CALIFORNIA FORM</b>	<b>496</b>
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
10/27/2014	Patrick Conroy [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Contractor Conroy Construction Inc.	1,000.00	If loan, enter interest rate, if any _____%
10/27/2014	Franklin Construction, inc. [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	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)