

**497 Contribution Report**

Amounts may be rounded to whole dollars.

RECEIVED

497 CONTRIBUTION REPORT

**NAME OF FILER**  
Patino for Mayor 2016

**AREA CODE/PHONE NUMBER** (805)934-5737

**I.D. NUMBER (if applicable)** 1342332

**STREET ADDRESS**  
2624 Airpark Drive

**CITY** Santa Maria      **STATE** CA      **ZIP CODE** 93455

**Date of This Filing** 10/19/2016

**Date Stamp** 2016 OCT 19 AM 10 12

**Report No.** Patino16-7

**Amendment to Report No.** \_\_\_\_\_  
(explain below)

**No. of Pages** 1

**CALIFORNIA FORM 497**  
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CITY CLERK'S OFFICE  
CITY OF SANTA MARIA

**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
10/18/2016	Rancho Guadalupe, LLC 1280 Bonita School Road Santa Maria, CA 93458	<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"/> 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
		<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: \_\_\_\_\_

RB