

497 Contribution Report

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

RECEIVED

497 CONTRIBUTION REPORT

NAME OF FILER
Committee to Elect Etta Waterfield for City Council 2014

AREA CODE/PHONE NUMBER (805) 922-4881

I.D. NUMBER (if applicable) 1367298

STREET ADDRESS
2151 S. College Dr Ste 101

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

Date of This Filing 10/24/2014 **Date Stamp**

CALIFORNIA FORM 497
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Report No. 10242014

2014 OCT 24 PM 4 19

Amendment to Report No. _____ **CITY CLERK'S OFFICE**
(explain below) **CITY OF SANTA MARIA**

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
10/24/2014	Robert Dickerson [REDACTED] Santa Maria, CA 93454	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input 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
		<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: _____