

RECEIVED

497 Contribution Report

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

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** 09/22/2014

**Report No.** 09222014

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

**No. of Pages** 1

2014 SEP 22 PM 4

CALIFORNIA FORM 497

CITY CLERK'S OFFICE  
CITY OF SANTA MARIA

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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
09/22/2014	Peggy Blough Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/22/2014	Carl Engel Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Engel & Gray Inc.	1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/22/2014	Linda Smith Santa Maria, CA 93455	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	4,337.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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

\*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