

# 497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER <b>AMY BUBLAK FOR CITY COUNCIL DISTRICT 4 2016</b>			Date of This Filing <b>10/27/2016</b>	Date Stamp <b>OCT 27 2016</b>	CALIFORNIA FORM <b>497</b> For Official Use Only
AREA CODE/PHONE NUMBER	LD. NUMBER (if applicable) <b>1350431</b>		Report No. <b>10</b>	Office of the City Clerk	
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <b>TURLOCK</b>	STATE <b>CA</b>	ZIP CODE <b>95382</b>	No. of Pages <b>1</b>		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/27/2016	CALIFORNIA REAL ESTATE POLITICAL ACTION COMMITTEE 525 S VIRGIL AVENUE LOS ANGELES, CA 90020	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00 <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: \_\_\_\_\_