497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER		Date of This Filing 10/30/2014	Date Stamp	CALIFORNIA FORM 497
Friends of Nakanishi for Lodi City Council 2014				For Official Use Only
AREA CODE/PHONE NUMBER: (916)686-1815	I.D. NUMBER (if applicable): 1328529	Report No. 2014-5	RECEIVED NOV 03 2014 CITY CLERK	
STREET ADDRESS: 1136 Junewood Court		☐ Amendment to Report No. _____ (explain below)		
CITY: Lodi	STATE: CA / ZIP CODE: 95242	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
10/29/2014	Teruo Kobayashi 1085 Mesita Road Pasadena, CA 91107	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CPA Kobayashi & Company	5,000.00 ☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan _____% Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ 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: _____

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