

Attw: Jennifer Land

**497 Contribution Report**

Amounts may be rounded to whole dollars.

NAME OF FILER <b>BRAD BATES FOR TURLOCK MAYOR AGAIN 2018</b>		Date of This Filing <b>8/22/2018</b>	Date Stamp	CALIFORNIA FORM <b>497</b> For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) <b>1400829</b>	Report No. <b>2018-2</b>	<b>RECEIVED</b> <b>AUG 22 2018</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>+6</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 I, D, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
0821/2018	FREDERICK M MURPHY MODESTO, CA 95357	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SELF EMPLOYED FARMER	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: \_\_\_\_\_