| NAME OF FILER Robert Puffer for | | Date of 10/12/20 This Filing Report No. 1 Amendment to Report No | | Date Stamp | CALIFORNIA 497 FORM 497 For Official Use Only | |
|------------------------------------|--|--|---------------------------|---|---|--|
| AREA CODE/PHONE N | IUMBER I.D. NUMBER (if applicable) 85-2952759 Repr | | | RECEIVED | | |
| STREET ADDRESS | □ A to R | | | OCT 12 2020 | | |
| CITY Turlock | STATE ZIP CODE (expla | ain below) of Pages | 1 | Office of the City Clerk | | |
| 1. Contribution | (s) Received | | | | | |
| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER 1.D. NUMBER) | | CONTRIBUTOR CODE* | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMP (IF SELF-EMPLOYED, ENTER NAME OF | | AMOUNT RECEIVED |
| 9/10/2020 | Albert Puffer Turlock, CA 95382 | | IND COM OTH PTY SCC | Retired | | 1,000.00 Check if Loan Provide interest rate |
| 10/10/20 | Stanislaus County Democratic Committee Sacramento, CA 95841 | | ☐ IND☐ COM☐ OTH☐ PTY☐ SCC | | | 1,500.00 Check if Loan Provide interest rate |
| | | | IND COM OTH PTY SCC | | | ☐ Check if Loan |

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

Provide interest rate