496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER		Date of This Filing 9/9/2020	Date Stamp	CALIFORNIA FORM 496
Ericka Chiara			RECEIVED	For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*	Report No.	SEP 09 2020	
STREET ADDRESS		☐ Amendment to Report No. (explain below)	BY:	
CITY / STATE / ZIP CODE		No. of Pages 1		
Oakdale / CA / 95361				

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED			
Ericka Chiara			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE
Oakdale City Council			

NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
09/09/2020	18"x24" yard signs	$772.80

Reason for Amendment _____

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER		Date of This Filing 9/14/2020	Date Stamp	CALIFORNIA FORM 496
Ericka Chiara			RECEIVED SEP 14 2020	For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*	Report No.		
STREET ADDRESS		☐ Amendment to Report No. (explain below)		
CITY / STATE / ZIP CODE		No. of Pages 1	BY:	
Oakdale / CA / 95361				

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
Ericka Chiara							
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
Oakdale City Council							

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
09/14/2020	4'x8' Double Sided signs	$1,267.99

Reason for Amendment _____

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER		Date of This Filing 9/17/2020	Date Stamp	CALIFORNIA FORM 496
Ericka Chiara			RECEIVED SEP 17 2020 BY: JG	For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*	Report No.		
STREET ADDRESS		☐ Amendment to Report No. (explain below)		
CITY / STATE / ZIP CODE		No. of Pages 1		
Oakdale / CA / 95361				

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED			
Ericka Chiara			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE
Oakdale City Council			

NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
09/16/2020	Door Hangers and Accounting Ledger	$169.02
09/17/2020	18"x24" Signs with Wire Stakes	$1,486.91

Reason for Amendment _____

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER			Date of This Filing 9/21/2020	Date Stamp	CALIFORNIA FORM 496
Ericka Chiara				RECEIVED SEP 21 2020	For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER *(if applicable)*		Report No.		
STREET ADDRESS			☐ Amendment to Report No. (explain below)	BY:	
CITY	STATE	ZIP CODE	No. of Pages 2		
Oakdale	CA	95361			

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED			
Ericka Chiara			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE
Oakdale City Council			

NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT

Reason for Amendment _____

496 Independent Expenditure Report

CALIFORNIA FORM **496**

NAME OF FILER: Ericka Chiara

I.D. NUMBER *(if applicable)*

3. Contributions of $100 or More 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	INTEREST RATES
09/21/2020	Roni Roberts Oakdale, CA 95361	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RT Financial	$2,000.00	If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

** 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