

# 496 Independent Expenditure Report

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

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER <b>TURLOCK ASSOCIATED POLICE OFFICERS POLITICAL ACTION COMMITTEE</b>		Date of This Filing <b>10-16-14</b>	Date Stamp <b>OCT 16 2014</b>	<div style="border: 2px solid black; padding: 5px; font-size: 2em; font-weight: bold; letter-spacing: 5px;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold; margin-top: 10px;">CALIFORNIA FORM 496</div> <div style="font-size: 0.8em; margin-top: 5px;">For Official Use Only</div>
AREA CODE/PHONE NUMBER <b>(209) 664-7323</b>	I.D. NUMBER (if applicable) <b>1372623</b>	Report No. <b>1</b>		
STREET ADDRESS <b>244 N. BROADWAY</b>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <b>TURLOCK, CA. 95386</b>	STATE <b>CA.</b>	ZIP CODE <b>95386</b>	No. of Pages <b>2</b>	

## 1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED <b>GARY SOISETH</b>				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD <b>MAYOR, CITY OF TURLOCK</b>	DISTRICT NO.	SUPPORT <b>X</b>	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
<b>OCT. 15, 2014</b>	PURCHASED SIGNS PRINTED WITH ENDORSEMENT IN SUPPORT OF 3 CANDIDATES; GARY SOISETH FOR MAYOR AND BILL DEHART AND MATTHEW JACOB FOR CITY COUNCIL IN TURLOCK. TOTAL COST OF SIGNS WAS \$807.20 PAID FOR WITH CHECK #992 TO JASON'S MOBILE DECAL. ( $\$807.20 \div 3 = \$269.07$ )	<b>\$269.07</b>
<b>OCT. 15 2014</b>	PURCHASED FLIERS PRINTED WITH ENDORSEMENT IN SUPPORT OF 3 CANDIDATES; GARY SOISETH FOR MAYOR AND BILL DEHART AND MATTHEW JACOB FOR CITY COUNCIL IN TURLOCK. TOTAL COST FOR PRINTING AND MAILING OF FLIERS WAS \$5,500.00 PAID FOR WITH CHECK #993 TO ABS DIRECT. ( $\$5500.00 \div 3 = \$1833.33$ )	<b>\$1,833.33</b>

Reason for Amendment: \_\_\_\_\_

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**GALIFORNIA FORM 496**  
 I.D. NUMBER (if applicable)  
**1372623**

NAME OF FILER

*TURLOCK ASSOCIATED POLICE OFFICERS POLITICAL ACTION COMMITTEE*

### 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
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> 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