

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER <u>No on Measure B Campaign</u>		Date of This Filing <u>5/22/08</u>	Date Stamp <u>RECEIVED</u> ENDORSED-FILED MAY 22 2008 SUSAN M. RANOCIAK YUBA COUNTY CLERK	CALIFORNIA 497 FORM For Official Use Only
AREA CODE/PHONE NUMBER <u>707-489-2792</u>	I.D. NUMBER (if applicable) <u>1306195</u>	Report No. _____		
STREET ADDRESS <u>705 N. STATE ST. #115</u>		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <u>UKIAH</u>	STATE <u>CA</u>	ZIP CODE <u>95482</u>	No. of Pages <u>1</u>	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
<u>5/21/08</u>	<u>DALE GIERENGER</u> <u>CA 95482</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>INVESTOR -</u> <u>SELF-EMPLOYED</u>	<u>\$11,413.88</u> <input checked="" type="checkbox"/> Check if Loan <u>0</u> % <small>Provide interest rate</small>
		<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 _____ % <small>Provide interest rate</small>
		<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 _____ % <small>Provide interest rate</small>

*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: