

**Officeholder and Candidate
Campaign Statement -
Form 470 Supplement**

SEE INSTRUCTIONS ON REVERSE

Amendment (Explain Below)

Date Stamp

RECEIVED

OCT 25 2018

Office of the
City Clerk

**CALIFORNIA
FORM 470**

For Official Use Only

This form is written notification that the officeholder/candidate listed below has received contributions totaling \$2,000 or more or has made expenditures of \$2,000 or more during the calendar year.

1. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Autumn Salazar Campaign 2018

STREET ADDRESS

CITY STATE ZIP CODE

Turlock CA 95380

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

2. Office Sought

OFFICE SOUGHT DISTRICT NUMBER (IF APPLICABLE)

City Council Member, Turlock District 1

DATE OF ELECTION (MONTH, DAY, YEAR)

November 6, 2018

3. Date Contributions Totaling \$2,000 or More Were Received or Date Expenditures of \$2,000 or More Were Made

October 12, 2018

(MONTH, DAY, YEAR)

Clear Form

Print Form