

497 Contribution Report

Amounts may be rounded to whole dollars.

RECEIVED
CITY CLERK

497 CONTRIBUTION REPORT

NAME OF FILER BRANDI MURDOCK FOR CARSON CITY COUNCIL 2016		Date of This Filing 10/22/2016	16 OCT 24 AM 7:24 CITY OF CARSON <i>Rec'd via fax on 10/22/16</i>	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (310) 817-6679	I.D. NUMBER (if applicable) 1389068	Report No. 3		
STREET ADDRESS 111 N. La Brea Ave., Suite 408		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Inglewood	STATE CA	ZIP CODE 90301	No. of Pages 1	

1. Contribution(s) 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
10/21/2016	Rudolph Vanterpool [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor California State University, Dominguez Hills	1,300.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<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 _____% Provide interest rate
		<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 _____% Provide interest rate

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

P.1
 323-756-8911
 Cunningham Family
 Oct 22 16 05:36p