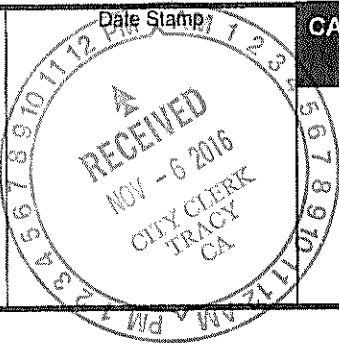


497 Contribution Report

Amounts may be rounded to whole dollars.

| | | | | |
|---|---|---|---|---|
| NAME OF FILER Rickman for Mayor, 2016 | | Date of This Filing <u>11/6/16</u> |  | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER (209) 612-1589 | I.D. NUMBER (if applicable) 1382486 | Report No. <u>7</u> | | |
| STREET ADDRESS 700 Lawn Court | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Tracy | STATE CA | ZIP CODE 95376 | No. of Pages <u>1</u> | |

1. Contribution(s) Received

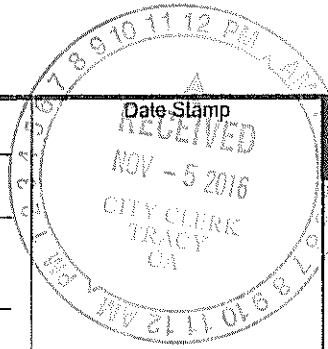
| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED |
|---------------|--|---|--|---|
| 11/5/16 | National DRIVE Committee FEC ID# C00032979 25 Louisiana Avenue NW Washington, DC 20001-2198 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | 1,000.00 <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> |
| | | <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> |

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

497 Contribution Report

Amounts may be rounded to whole dollars.



| | | | |
|--|--|---|---|
| NAME OF FILER Rickman for Mayor, 2016 | | Date of This Filing <u>11/5/16</u> | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER (209) 612-1589 | I.D. NUMBER (if applicable) 1382486 | Report No. <u>7</u> | |
| STREET ADDRESS 700 Lawn Court | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | |
| CITY Tracy | STATE CA | ZIP CODE 95376 | No. of Pages <u>2</u> |

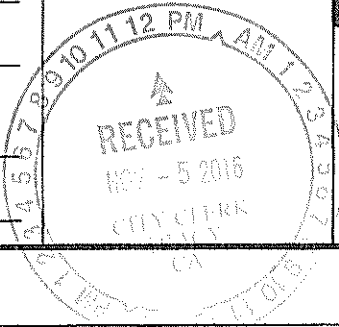
2. Contribution(s) Made

| DATE MADE | FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION (IF APPLICABLE) |
|-----------|---|--|------------------------|----------------------------------|
| 11/4/16 | Aman Truck Lines LLC DBA ATL 1852 W. 11th Street #101 Tracy, CA 95376 | Robert Rickman/Mayor | 1,000.00 | 11/8/16 |
| 11/4/16 | Sanjit S. Chahal 3100 Fleur De Lis Drive Modesto, CA 95356 | Robert Rickman/Mayor Self Employed, Allure Dental | 2,500.00 | 11/8/16 |
| 11/4/16 | All Star Movers & Storage, LLC 4101 Dublin Blvd. Ste: F #517 Dublin, CA 94568 | Robert Rickman/Mayor | 1,000.00 | 11/8/16 |
| 11/4/16 | Hardeep & Sons, Inc. 25440 S. Schulte Road Tracy, CA 95377 | Robert Rickman/Mayor | 1,000.00 | 11/8/16 |

Reason for Amendment: _____

497 Contribution Report

Amounts may be rounded to whole dollars.

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|---|---|--|---|---|
| NAME OF FILER Rickman for Mayor, 2016 | | Date of This Filing 11/5/16 | Date Stamp | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER (209) 612-1589 | I.D. NUMBER (if applicable) 1382486 | Report No. 7 |  | |
| STREET ADDRESS 700 Lawn Court | | <input type="checkbox"/> Amendment to Report No. (explain below) | | |
| CITY Tracy | STATE CA | ZIP CODE 95376 | | |

1. Contribution(s) Received

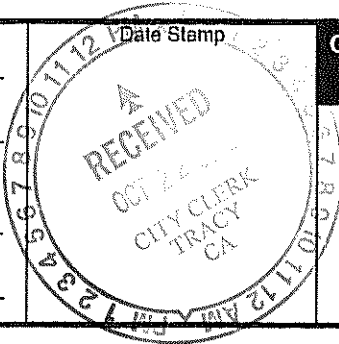
| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED |
|---------------|--|---|--|---|
| 11/4/16 | Randeep S. Bajwa 1625 Bennington Ct. Stockton, CA 95209 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self Employed, Randeep S. Bajwa M.D. | 1,000.00 <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small> |
| 11/4/16 | Charnjit Singh 424 Fisher Ct. Tracy, CA 95377 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self Employed, Dakha Trucking | 1,000.00 <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small> |
| 11/4/16 | Sanjeev K. Bansal 1504 Rose Garden Court Modesto, CA 95356 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Physician, Kaiser Permanente, Modesto | 1,000.00 <input type="checkbox"/> Check if Loan _____% <small>Provide interest rate</small> |

Reason for Amendment: _____

****Contributor Codes**
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497 Contribution Report

Amounts may be rounded to whole dollars.

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|---|---|--|---|---|
| NAME OF FILER Rickman for Mayor, 2016 | | Date of This Filing 10/22/16 |  | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER 209-612-1589 | I.D. NUMBER (if applicable) 1382486 | Report No. 6 | | |
| STREET ADDRESS 700 Lawn Court | | <input type="checkbox"/> Amendment to Report No. (explain below) | | |
| CITY Tracy | STATE CA | ZIP CODE 95376 | | |

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 |
|---------------|--|---|--|---|
| 10/21/16 | California Real Estate PAC- California Association of Realtors FPPC# 890106 525 S. Virgil Ave. Los Angeles, CA 90020 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | 1,000.00 <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 |

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Reason for Amendment: _____

497 Contribution Report

Amounts may be rounded to whole dollars.

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|---|---|--|-----------------------|----------------------------|
| NAME OF FILER Rickman for Mayor, 2016 | | Date of This Filing 10/9/16 | | CALIFORNIA FORM 497 |
| AREA CODE/PHONE NUMBER (209) 612-1589 | I.D. NUMBER (if applicable) 1382486 | Report No. 4 | | For Official Use Only |
| STREET ADDRESS 700 Lawn Court | | <input type="checkbox"/> Amendment to Report No. (explain below) | | |
| CITY Tracy | STATE CA | ZIP CODE 95376 | No. of Pages 1 | |

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 |
|---------------|--|---|--|---|
| 10/8/16 | Harry S. Truman Club of Stockton 5635 Stratford Circle, Ste. A2 Stockton, CA 95207 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1500.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| 10/8/16 | Central Labor Council COPE Committee 1200 N. Center Street Stockton, CA 95202 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2,000.00 <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 |

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Reason for Amendment: _____

497 Contribution Report

Amounts may be rounded to whole dollars.

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|---|---|---|--|---|
| NAME OF FILER Rickman for Mayor, 2016 | | Date of This Filing 10/3/16 | Date Stamp RECEIVED CITY CLERK'S OFFICE 2016 OCT -3 PM 12: 51 CITY OF TRACY TRACY, CA | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER 209-612-1589 | I.D. NUMBER (if applicable) 1382486 | Report No. 3 | | |
| STREET ADDRESS 700 Lawn Court | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Tracy | STATE CA | ZIP CODE 95376 | No. of Pages 1 | |

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 |
|---------------|---|---|--|--|
| 10/3/16 | Sheet Metal Worer's International Assoc. Local No. 104 PAC ID. # 850381 2610 Crow Canyon Road Ste. 300 San Ramon, CA 94583 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | 1,000.00 <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 |

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Reason for Amendment: _____

497 Contribution Report

Amounts may be rounded to whole dollars.

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|---|---|--|---|---|
| NAME OF FILER Rickman for Mayor, 2016 | | Date of This Filing 9/26/16 | RECEIVED CITY CLERK'S OFFICE 2016 SEP 26 AM 10:17 CITY OF TRACY TRACY, CA | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER (209) 612-1589 | I.D. NUMBER (if applicable) 1382486 | Report No. 2 | | |
| STREET ADDRESS 700 Lawn Court | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Tracy | STATE CA | ZIP CODE 95376 | No. of Pages 1 | |

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 |
|---------------|--|---|--|--|
| 9/26/16 | Commercial Maintenance Renovation 1620 Waverly Court Tracy, CA 95376-2907 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1,100.00 <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> |
| | | <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> |

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Reason for Amendment: _____