NAME OF FILER Nancy D. Young		Date of This Filing $\frac{1}{2}$	0/21/2020	Date Stamp ET CALIF	ORNIA 497
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1418900		Report No. 2	020-4		r Official Use Only
STREET ADDRESS CITY Tracy	STATE ZIP CODE CA 95376	Amendmento Report No. (explain below) No. of Pages	1	CITY OF TRACY TRACY, CA	
1. Contribution(s) Recei	ived			·	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF C (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	ONTRIBUTOR	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/20/2020	V. Lopez CA 95376		IND COM OTH PTY SCC	Retired	4,000.00 Check if Loan **Provide interest rate**
10/21/2020	Farms Inc.		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		3,500.00 Check if Loan Provide interest rate
10/21/2020 Mante	ca, CA 95337		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		4,000.00 Check if Loan ** **Provide interest rate**

Reason for Amendment: __

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 497 (Feb/2019) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

NAME OF FILER Nancy D. Young			Date of 10	0/02/2020	Date Stamp CALIFO FOR	
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1418900		Report No. 20		CITY 3 2m	Official Use Only	
STREET ADDRESS			Amendmen to Report No.	nt v	TRES WO	
CITY Tracy		STATE ZIP CODE CA 95376	(explain below) No. of Pages	1	SIMA	
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DATE RECEIVED	FULL NAMI	IE, STREET ADDRESS AND ZIP CODE OF CON (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	ITRIBUTOR	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/02/2020	Nancy D. Young Tracy, CA 95376			✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Candidate CEO, Spring Up Inspirations	7,000.00 Check if Loan Provide interest rate
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	•	☐ Check if Loan
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan
Reason for Amendr	ment:			*	* Contributor Codes IND - Individual COM - Recipient Committee (other OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committe	

NAME OF FILER Nancy D. Young AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1418900 STREET ADDRESS CITY STATE ZIP CODE Tracy CA 95376 1. Contribution(s) Received		Date of 09/29/2020 This Filing		Date Stamp CALIFORNIA 49		
		1418900 STATE ZIP CODE	Report No. 2020-2 Amendment to Report No. (explain below) No. of Pages 1		2020 SEP 30 AM 7: 44 GITY OF TRACY	
DATE RECEIVED	FULL NAM	IE, STREET ADDRESS AND ZIP CODE OF CONTR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	RIBUTOR	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/29/2020	California Real Estat 515 S. Figueroa St, S Los Angeles, CA 900		C) #890106	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		1,000.00 Check if Loan Provide interest rate
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan
				☐ IND☐ COM☐ OTH☐ PTY☐ SCC		☐ Check if Loan

Reason for Amendment: _

COM - Recipient Committee (other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

* Contributor Codes IND - Individual

497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER		Date of		Date Stamp CALIF	OPNIA 40
Nancy D. Young		This Filing	09/10/2020	TO CLERK'S OFFICE FOLLOWING	
AREA CODE/PHONE NU	MBER I.D. NUMBER (if applicable) 1418900	Report No	2020-1	020 SEP 10 PM 1:55	Official Use Only
STREET ADDRESS		☐ Amendment to Report No.		CITY OF TRACY TRACY, CA	
CITY	STATE ZIP CODE	(explain below)	1 of 2	I MU IS WITH	
Tracy	CA 95376	No. of Pages			-
1. Contribution	n(s) Received				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/10/2020	Lance Waite Newport Beach, CA 92660		IND COM OTH PTY SCC	Integral Communities, Principal	1,250.00 Check if Loan Provide interest rate
09/10/2020	Craig Manchester Newport Beach, CA 92660		IND COM OTH PTY SCC	Integral Communities, Managing Partner	1,250.00 Check if Loan Provide interest rate
09/10/2020	C. Evan Knapp Newport Beach, CA 92660		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Integral Communities, Principal	1250.00 Check if Loan Provide interest rate
Reason for Amendm	nent:			**Contributor Codes IND – Individual COM – Recipient Committee (oth OTH – Other (e.g., business enti PTY – Political Party SCC – Small Contributor Commi	ity)

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

497 Contribution Report

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

497 CONTRIBUTION REPORT

				Company of the April 10 (South 24)	NTRIBUTION REPORT
NAME OF FILER Nancy D. Young		Date of This Filing	09/10/2020		ORNIA 497
AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 1418900		Report No	2020-1	1010 00: 10 :1: 14 90	Official Use Only
STREET ADDRESS		☐ Amendment to Report No.		CITY OF TRACY TRACY, CA	
CITY	STATE ZIP CODE		explain below)		
Tracy	CA 95376	No. of Pages			
1. Contribution(s	s) Received				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/10/2020	John Stanek Newport Beach, CA 92660		IND COM OTH PTY SCC	Integral Communities, Principal	1,250.00 Check if Loan Provide interest rate
			☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan Provide interest rate
			☐ IND☐ COM☐ OTH☐ PTY☐ SCC		☐ Check if Loan ————————————————————————————————————
Reason for Amendment	t:			**Contributor Codes IND – Individual COM – Recipient Committee (of OTH – Other (e.g., business en PTY – Political Party SCC – Small Contributor Comm	tity)

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