Statement of Recipient Cor				Date Stam	р		FORNIA 410	
Statement Type	☐ Initial  Not yet qualified ☐ or	Amendment List I.D. number: # 1386883	Termina List I.D. numb	ation – See Part 5 er:	SEP 06	5 2016		For Official Use Only
	// Date qualified as committee	09		ermination				
1. Committee I	nformation		100	2. Treasurer and O	ther Principal O	fficers		
Chavez for Oxnard City Council, 2016				Gloria E. Zaval				
				2021 Pericles F	Place			
STREET ADDRESS (NO P.	·			CITY		STATE	ZIP CODE	AREA CODE/PHONE
1920 W Hemlock St				Oxnard		CA	93033	(805)814-2066
CITY	STATE	ZIP CODE AREA COD		NAME OF ASSISTANT TREASUR	ER, IF ANY			
Oxnard	CA 9	3035 (805)74	11-8202					
MAILING ADDRESS (IF D	HFFERENT)			STREET ADDRESS (NO P.O. BOX	)			
FAX / E-MAIL ADDRESS				CITY		STATE	ZIP CODE	AREA CODE/PHONE
chavezforoxna	ard@outlook.com							
COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE			NAME OF PRINCIPAL OFFICER(	S)	mi mira mining a susana			
Ventura	Oxnard							
ay a colonia de la colonia				STREET ADDRESS (NO P.O. BOX	`}			
Attach additiona	l information on appropriate	ely labeled continuation she	rets.	CITY		STATE	ZIP CODE	AREA CODE/PHONE
penalty of perjo	reasonable diligence in prepury under the laws of the Standard By	ate of California that the for	regoide is true	of treasurer of assistant treas		ein is tru	ie and compl	ete. I certify under



	2EP 11 0 24	310		
Statement of Organization				CALIFORNIA AAA
Recipient Committee				FORM 410
INSTRUCTIONS ON REVERSE			- Annapolities	Page 2
COMMITTEE NAME				I.D. NUMBER
Chavez for Oxnard City Council, 2016				1386883
All committees must list the financial institution where the campaig	n bank account is located.			
NAME OF FINANCIAL INSTITUTION	AREA CODE/PHONE	BANK ACCOUNT	NUMBER	
Wells Fargo	(805)382-8900	347898	6403	
ADDRESS	CITY	STATE	ZIP CODE	
533 W Channel Islands Blvd	Port Hueneme	Ca	93041	
4. Type of Committee Complete the applicable sections.				
Controlled Committee				
• List the name of each controlling officeholder, candidate, or stadistrict number, if any, and the year of the election.	ate measure proponent. If candidat	te or officeholder co	ntrolled, also list the ele	ective office sought or held, and
• List the political party with which each officeholder or candida	te is affiliated or check "nonpartisan	ı."		
• If this committee acts jointly with another controlled committee	e, list the name and identification n	umber of the other	controlled committee.	
NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT	ELECTIVE OFFICE SOU (INCLUDE DISTRICT NUMB		YEAR OF ELECTION	N PARTY
Daniel Chavez Jr.	City Council		2016	✓ Nonpartisan
				Nonpartisan
Primarily Formed Committee Primarily formed to support or	oppose specific candidates or mea	sures in a single elec	tion. List below:	
CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR I		5) OFFICE SOUGHT OR HELD IDE DISTRICT NO., CITY OR	OR MEASURE(S) JURISDICTION	CHECK ONE
				SUPPORT OPPOSE

SUPPORT

SEP 0 6 2016

Statement of Organization Recipient Committee	FORM 410
INSTRUCTIONS ON REVERSE	Page 3
COMMITTEE NAME	I.D. NUMBER
Chavez for Oxnard City Council, 2016	1386883
4. Type of Committee (Continued)	
General Purpose Committee  Not formed to support or oppose specific cand  □ CITY Committee □ COUNTY Committee	idates or measures in a single election. Check only one box:  STATE Committee
PROVIDE BRIEF DESCRIPTION OF ACTIVITY	
Sponsored Committee List additional sponsors on an attachment.	
NAME OF SPONSOR INI	DUSTRY GROUP OR AFFILIATION OF SPONSOR
STREET ADDRESS NO. AND STREET CITY	STATE ZIP CODE
Small Contributor Committee	

- 5. Termination Requirements By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or proponent certify that all of the following conditions have been met:
  - This committee has ceased to receive contributions and make expenditures;
  - This committee does not anticipate receiving contributions or making expenditures in the future;
  - This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
  - This committee has no surplus funds; and
  - This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
    - -- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
    - Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.