

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Oxnard 2020 Coalition		<b>Date of This Filing</b> 10/19/2020		<b>Date Stamp</b> Oxnard City 2020 OCT 19 PM 3:49		<b>CALIFORNIA FORM 496</b>	
<b>AREA CODE/PHONE NUMBER</b>		<b>I.D. NUMBER (if applicable)</b> 1403750		<b>Report No.</b> 201019.4		For Official Use Only	
<b>STREET ADDRESS</b> Redacted		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		<b>No. of Pages</b> 2			
<b>CITY</b> Oxnard		<b>STATE</b> CA		<b>ZIP CODE</b> 93036			

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b>				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>				
OFFICE SOUGHT OR HELD				Measure N, Early termination or extension of Measure O sales tax				
DISTRICT NO.		SUPPORT	OPPOSE	BALLOT NO./LETTER		JURISDICTION	SUPPORT	OPPOSE
				N		City of Oxnard		X

## 2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/19/2020	Literature mailing Cumulative to date total \$3071.90	1,734.40

Reason for Amendment: \_\_\_\_\_

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Received  
Oxnard City Clerk

**CALIFORNIA FORM 496**

2020 OCT 19 PM 3:49

NAME OF FILER  
Oxnard 2020 Coalition

I.D. NUMBER (if applicable)  
1403750

### 3. Contributions of \$100 or More 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	INTEREST RATES
10/09/2020	Oxnard Chamber of Commerce PAC Redacted Oxnard, CA 93036 Committee ID# 961270	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		7,500.00	If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

**\*\*Contributor Codes**  
 IND – Individual  
 COM – Recipient Committee (other than PTY or SCC)  
 OTH – Other  
 PTY – Political Party  
 SCC – Small Contributor Committee