

496 Independent Expenditure Report

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

CITY OF OXNARD
496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Oxnard Coalition for Jobs and Transparency		Date of This Filing 11/06/2012	CITY OF OXNARD 2012 NOV -6 P 1:34 CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 714-540-2295	I.D. NUMBER (if applicable) 1352439	Report No. 7	
STREET ADDRESS 1237 S Victoria Ave #407		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Oxnard, CA	STATE 93035	ZIP CODE 93035	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Dick Jacques				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member Oxnard	DISTRICT NO.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
11/05/2012	LIT & POS	8,658.90

Reason for Amendment: _____