Recipient Committee  
Campaign Statement  
Cover Page  
(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   - Officetholder, Candidate Controlled Committee
   - State Central and/or Local Committee
   - Recall  
     (Also Complete Part 6)
   - General Purpose Committee
     - Sponsored
     - Small Contributor Committee
   - Primarily Formed Candidate/Officetholder Committee  
     (Also Complete Part 7)

2. Type of Statement:
   - Preelection Statement
   - Semi-annual Statement
   - Special Odd-Year Report
   - Supplemental Preelection Statement - Attach Form 495

3. Committee Information
   - I.D. NUMBER: 96-1270
   - COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
     OXNARD CHAMBER OF COMMERCE - PAC
   - STREET ADDRESS (NO P.O. BOX)
     400 E ESPLANADE DR #302
   - CITY: OXNARD  
     STATE: CA  
     ZIP CODE: 93036  
     AREA CODE/PHONE: 805-983-6118
   - MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   - CITY:  
     STATE:  
     ZIP CODE:  
     AREA CODE/PHONE: 

   - OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification
   I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

   Executed on 1-27-12  
   Date

   By
   Signature of Treasurer or Assistant Treasurer

   Executed on  
   Date

   By
   Signature of Controlling Officetholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

   Executed on  
   Date

   By
   Signature of Controlling Officetholder, Candidate, State Measure Proponent

   Executed on  
   Date

   By
   Signature of Controlling Officetholder, Candidate, State Measure Proponent

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)  
State of California
### Contributions Received

<table>
<thead>
<tr>
<th>Item</th>
<th>Schedule</th>
<th>Line</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total To Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>Schedule A, Line 3</td>
<td>3270</td>
<td>7140</td>
<td></td>
</tr>
<tr>
<td>Loans Received</td>
<td>Schedule B, Line 3</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>3270</td>
<td>7140</td>
<td></td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>3270</td>
<td>7140</td>
<td></td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Item</th>
<th>Schedule</th>
<th>Line</th>
<th>Column A (To Date)</th>
<th>Column B (Calendar Year To Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>Schedule E, Line 4</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Loans Made</td>
<td>Schedule H, Line 3</td>
<td>0</td>
<td>0</td>
<td></td>
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<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>0</td>
<td>0</td>
<td></td>
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</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Item</th>
<th>Previous Summary Page, Line 16</th>
<th>11713</th>
<th>14983</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>Column A, Line 3 above</td>
<td>3270</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td>Schedule I, Line 4</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Cash Payments</td>
<td>Column A, Line 8 above</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15</td>
<td>14983</td>
<td></td>
</tr>
</tbody>
</table>

*If this is a termination statement, Line 16 must be zero.*

### Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made

Date of Election (mm/dd/yy) | Total to Date
\[\text{/} / \text{/} \text{/} \] | $ \text{__________}
\[\text{/} / \text{/} \text{/} \] | $ \text{__________}

*Amounts in this section may be different from amounts reported in Column B.

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents

19. Outstanding Debts

See instructions on reverse

Add Line 2 + Line 9 in Column B above

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Schedule A
### Monetary Contributions Received

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

### Statement covers period

- **from**: 7-1-2011
- **through**: 12-31-2011

### CALIFORNIA FORM 460

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>OXNARD CHAMBER OF COMMERCE - PAC</th>
</tr>
</thead>
<tbody>
<tr>
<td>I.D. NUMBER</td>
<td>96-1270</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7-29-11</td>
<td>THRU INTERMEDIARY OXNARD CHAMBER 400 E ESPERANDO DR #302 OXNARD CA 93036</td>
<td>☑ IND</td>
<td></td>
<td>660</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8-31-11</td>
<td>ALL ARE VOLUNTARY CONTRIBUTIONS OF $30 OR LESS PER YEAR. NON EQUAL $100 OR MORE</td>
<td>☑ IND</td>
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<td>480</td>
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<td>9-30-11</td>
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<td>☑ IND</td>
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<td>420</td>
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<tr>
<td>10-31-11</td>
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<td>390</td>
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<tr>
<td>11-30-11</td>
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<td>☑ IND</td>
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<td>540</td>
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</tr>
</tbody>
</table>

| SUBTOTAL      | $ 2490                                      |

### Schedule A Summary

1. **Amount received this period – itemized monetary contributions.**
   
   (Include all Schedule A subtotals.) ........................................................................................................... $ 0

2. **Amount received this period – unitemized monetary contributions of less than $100** ......................... $ 3270

3. **Total monetary contributions received this period.**
   
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ...................................... **TOTAL** $ 3270

*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

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Schedule A (Continuation Sheet)
Monetary Contributions Received

**NAME OF FILER**

**OXNARD CHAMBER OF COMMERCE - PAC**

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF OCCUP-EMPLOYER, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-30-11</td>
<td>THRU INTERMEDIARY OXNARD CHAMBER 400 E ESPLANADE DR #302 OXNARD CA 93036</td>
<td></td>
<td></td>
<td>780</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

All are voluntary contributions of $30 or less per year. Non equal $100 or more

**SUBTOTALS$** 780

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee