Officeholder and Candidate Campaign Statement – Short Form
(Government Code Section 84206)

Date of election if applicable: (Month, Day, Year)
11/2/2010

☐ Amendment (Explain Below)

1. Statement Covers Calendar Year 2013.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
(Maria) Carmen Ramirez

STREET ADDRESS
2081 N. Oxnard Blvd., #150

CITY
OXNARD

STATE
CA

ZIP CODE
93036

AREA CODE/DAYTIME PHONE NUMBER
(805) 890-7088

OPTIONAL: FAX/E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Oxnard City County

JURISDICTION (LOCATION)
City of Oxnard

DISTRICT NUMBER (IF APPLICABLE)

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

<table>
<thead>
<tr>
<th>COMMITTEE NAME AND I.D. NUMBER</th>
<th>COMMITTEE ADDRESS</th>
<th>NAME OF TREASURER</th>
</tr>
</thead>
<tbody>
<tr>
<td>none</td>
<td></td>
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</tbody>
</table>

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than $1,000 and that I will spend less than $1,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on September 8, 2013

By (Signature of Officeholder or Candidate)

FPPC Form 470 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
Officeholder and Candidate
Campaign Statement
Form 470 Supplement
(Government Code Section 84206)

SEE INSTRUCTIONS ON REVERSE

This form is written notification that the officeholder/candidate listed below has received contributions totaling $1,000 or more or has made expenditures of $1,000 or more during the calendar year.

1. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

(Maria) Carmen Ramirez

STREET ADDRESS

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CITY

Oxnard,

STATE

CA

ZIP CODE

93036

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX/E-MAIL ADDRESS

2. Office Sought

OFFICE SOUGHT

City Council

DISTRICT NUMBER (IF APPLICABLE)

nA

DATE OF ELECTION (MONTH, DAY, YEAR)

November 2, 2010

3. Date Contributions Totaling $1,000 or More Were Received or Date Expenditures of $1,000 or More Were Made

Dec. 7, 2010

(MONTH, DAY, YEAR)
September 9, 2013

Regarding late filing of Form 470

I am filing this form today, September 9, 2013. I was unaware that this form needed to be filed, as the language is confusing on the form with regard to the instructions.

I have not had an active campaign committee in 2013, I have not received any contributions in this year, either, however I do receive a salary for my service on Oxnard City Council, which is more than $200.

Maria Carmen Ramirez