

# 497 Contribution Report

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

**CITY OF OXNARD**  
**CITY CLERK**  
Date Stamp

497 CONTRIBUTION REPORT

<b>NAME OF FILER</b> Tim Flynn for Mayor 2014		<b>Date of This Filing</b> 8/8/14	2014 SEP - 8 P 3: 20	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> 805 340-1922	<b>I.D. NUMBER (if applicable)</b> 1311191	<b>Report No.</b> _____		
<b>STREET ADDRESS</b> 211 North F Street		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> Oxnard	<b>STATE</b> CA	<b>ZIP CODE</b> 93030	<b>No. of Pages</b> _____	

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
8/1/14	Timothy J. O'Hearn and Leo A. O'Hearn 359 Nevada Avenue Ventura, CA 93004	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor	200.00  <input type="checkbox"/> Check if Loan  _____% Provide interest rate
8/18/14	Barbara R. Gilman 47 Carriage Square Oxnard, CA 93030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Free Lance Writer	100.00  <input type="checkbox"/> Check if Loan  _____% Provide interest rate
8/20/14	Edward Gurrola, TTEE and Elaine Gurrola, TTAA 4101 Romany Drive Oxnard, CA 93035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor	200.00  <input type="checkbox"/> Check if Loan  _____% Provide interest rate

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

**\*\*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

# 497 Contribution Report

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

497 CONTRIBUTION REPORT

NAME OF FILER Tim Flynn for Mayor 2014		Date of This Filing <u>8/8/14</u>	Date Stamp	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER 805 340-1922	I.D. NUMBER (if applicable) 1311191	Report No. _____		
STREET ADDRESS 211 North F Street		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Oxnard	STATE CA	ZIP CODE 93030	No. of Pages _____	

## 2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
9/3/14	Alex Skupien 4125 Harbor Island Lane Oxnard, CA 93035	Technical Manager/Software Engineer	250.00	
9/6/14	Loraine Effress 2831 Harbor Blvd. Oxnard, CA 93035	Retired	250.00	

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