**NAME OF FILER**
AARON STARR FOR OXNARD CITY COUNCIL 2014

**AREA CODE/PHONE NUMBER**
805-404-8693

**STREET ADDRESS**
2130 POSADA DRIVE

**CITY**
OXNARD

**STATE**
CA

**ZIP CODE**
93030

**DATE OF 11/01/2014**

**DATE OF THIS FILING**
11/01/2014

**REPORT NO.**
014

**AMOUNT RECOGNIZED**
$1,500.00

**DATE RECEIVED**
10/31/2014

**CONTRIBUTOR NAME**
PATRICK WALSH

**ADDRESS**
1040 SANTA CRUZ ISLAND DRIVE #28
CAMARILLO, CA 93012

**CONTRIBUTOR CODE**
IND

**CONTRIBUTOR CODE**
COM

**CONTRIBUTOR CODE**
OTH

**CONTRIBUTOR CODE**
PTY

**CONTRIBUTOR CODE**
SCC

**AMOUNT**
$1,500.00

**AMOUNT**

**AMOUNT**

**AMOUNT**

**AMOUNT**

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IND

**CONTRIBUTOR CODE**
COM

**CONTRIBUTOR CODE**
OTH

**CONTRIBUTOR CODE**
PTY

**CONTRIBUTOR CODE**
SCC

**AMOUNT**

**AMOUNT**

**AMOUNT**

**AMOUNT**

**REASON FOR AMENDMENT**

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**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 497 (March/2011)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)