

CA 1769757

496 Independent Expenditure Report

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

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Friends of PUEBLO Action Fund		Date of This Filing 06/03/2013	Date Stamp CITY OF OXNARD CITY CLERK 2013 JUN -3 P 4:01	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (805) 932-4441	I.D. NUMBER (if applicable) 1279696	Report No. IE 1		
STREET ADDRESS 500 South Broadway, Suite 247		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Santa Maria, CA	STATE CA	ZIP CODE 93454		

1. List Only One Candidate or Ballot Measure

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

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
05/20/2013	Ground Campaign *Estimate 5/13-6/7/13	14,141.67

Reason for Amendment: _____

3861 KAL