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Statement Type	Initial Not yet qualified or	Amendment List I.D. number: #	Termination List I.D. number: #	– See Part 5		ITY OF OXA			For Official Use Only	
	Date qualified as committee	Date qualified as committee (If applicable)	/ Date of Termin	nation	OFF	CE OF CITY	CLERK			
1. Committee In NAME OF COMMITTEE	nformation					er Principal	Officers	anna an ann an ann ann ann ann ann ann		
Steve Huber for Oxnard City Council 2016				AME OF TREASUR EIIEEN HU FREET ADDRESS (N	ber 0 P.O. BOX)			din kanya di kanya k		
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Attach additional	l information on appropriatel	y labeled continuation shee	ts.	ITY			STATE	ZIP CODE	AREA CODE/PHONE	
penalty of perju	reasonable diligence in prepa ury under the laws of the Stat /20/2016 By /20/2016 By DATE By DATE By DATE By	e of California that the fore Eleennet Stople of SIGNATURE SIGNATURE	going is true and	COFFECT. ASURER OR ASSIST HOLDER, CANDIDAT	TANT TREASURI TE, OR STATE M TE, OR STATE M	ER IEASURE PROPONENT IEASURE PROPONENT			FPPC Form 410 (Jan/2016)	
							FFFC A	uvire: auvice@	ofppc.ca.gov (866/275-3772) www.fppc.ca.gov	

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