

Statement of ( Recipient Cor Statement Type	nmittee  Initial  Not yet qualified or  Date qualified as committee	Amendment List I.D. number:  # Date qualified as committee (If applicable)	#/	oer: in the	of the State of California  AUG 04 2016		F (	FORNIA 410 DRM 410 For Official Use Only	
1. Committee I	nformation			2. Treasurer and	l Other Principal O	fficers			
	or Oxnard City Counc	il 2016		Eileen Huber	•				
				STREET ADDRESS (NO R.O. BOX)					
				1411 Ebony	Drive				
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1411 Ebony D				Oxnard		CA	93030	(805)981-0858	
CITY	STATE	ZIP CODE AREA CODE		NAME OF ASSISTANT TREA					
Oxnard	CA 9	3030 (805)50	9-9214	Steve Huber		and the state of t	none of the state		
MAILING ADDRESS (IF D	OFFERENT)			1411 Ebony					
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steve4oxnard@	@gmail.com			Oxnard		CA	93030	(805)509-9214	
COUNTY OF DOMICILE	JURISDICTION WI	HERE COMMITTEE IS ACTIVE	ACCUMANCE CHISTOCHES CONTRACTOR C	NAME OF PRINCIPAL OFFIC	CER(S)			(000)000 02 17	
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Attach additional	l information on appropriate	ely labeled continuation she	ets.	CITY		STATE	ZIP CODE	AREA CODE/PHONE	
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FPPC Form 410 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Statement of Organization Recipient Committee INSTRUCTIONS ON REVERSE						CALIFORNIA 410 FORM	
Steve Huber for Oxnard City Council 2016						.D. NUMBER	
All committees must list the financial institution where the campaign b	ank accoun	t is located.					
NAME OF FINANCIAL INSTITUTION	AREA CO	DDE/PHONE	1	BANK ACCOUNT NUMBE	described and survivors of the Pools and State of the State of the State of the State of Stat	national parts (Anna 3 to 2007) proceducing parts are quite field that recent and procedures country (Asia Holdes) and transcript parts procedures to the country of the country parts parts procedures to the country of the country parts parts procedures to the country of the country parts parts procedures to the country of the country parts parts procedures to the country of the country parts p	
Rabobank NA		(805)240-1451		14121104			
ADDRESS	CITY	The succession of the successi	CHEST PROPERTY OF STREET	STATE	ZIP CODE	THE THE PROPERTY OF THE PROPER	
155 South A Street, Oxnard, CA 93030							
4. Type of Committee Complete the applicable sections.							
Controlled Committee						e earliet en mar en l'en en gent d'altre métablique de maine l'était déchété de behand paus de l'était de dans	
<ul> <li>List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.</li> </ul>							
List the political party with which each officeholder or candidate is affiliated or check "nonpartisan."							
• If this committee acts jointly with another controlled committee,	list the na	me and identification nu	mber of	the other contr	olled committee.		
NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT	nidelja u Kaluninu koja sa sa politika kalunininini si sa sa	ELECTIVE OFFICE SOUG (INCLUDE DISTRICT NUMBER			YEAR OF ELECTION	V PARTY	
Stephen H Huber		Oxnard City Council 20			2016	Nonpartisan	
			-			Nonpartisan	
Primarily Formed Committee Primarily formed to support or o	ppose spec	cific candidates or measu	ures in a	single election.	List below:	менен корол в Витония на опсониванения регулират на на нестрои высучения установания по на невознати на выполн	
CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LET	CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)  CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION  (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)  CHECK ONE						
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## **Statement of Organization Recipient Committee**

INSTRUCTIONS ON REVERSE

CALIFORNIA **FORM** 

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"Steve" Huber for Oxnard City Council 2016		I.D. NUMBER			
4. Type of Committee (Continued)					
General Rurpose Committee  Not formed to support or oppose specific candidates or measures in a single election. Check only one box:  CITY Committee COUNTY Committee STATE Committee					
PROVIDE BRIEF DESCRIPTION OF ACTIVITY					
Sponsored Committee List additional sponsors on an attachment.					
NAME OF SPONSOR	INDUSTRY GROUP OR AFFILIATION OF SPONSOR				
STREET ADDRESS NO. AND STREET C	ITY STATE	ZIP CODE			
Small Contributor Committee  Date qualified					
5 Termination Regulirements Rusigning the periferation the tracture	r acciptant troacurer and/or candidate officeholder or proposan	and the street of the fall and the second second second			

- This committee has ceased to receive contributions and make expenditures;
- · This committee does not anticipate receiving contributions or making expenditures in the future;
- This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
- · This committee has no surplus funds; and
- This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
  - -- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
  - -- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.