#### Recipient Committee Campaign Statement Cover Page

Date Stamp
Received
Oxnard City Clerk
Pate of election if applicable:

STATE

ZIP CODE

0.88				394		
CAL			IΑ	y, w		
					O I	w,
4	FOR	Ш				

COVER PAGE

(4-51) 10 (4-1) 10 (4-1)			and the second second
Page	1	of	22

(Month, Day, Year) For Official Use Only 2016 SEP 29 PM 4: 59 July 1 2016 from Sep 24 2016 Nov 8 2016 SEE INSTRUCTIONS ON REVERSE through 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Preelection Statement Primarily Formed Ballot Measure Officeholder, Candidate Controlled Committee **Quarterly Statement** Committee Semi-annual Statement State Candidate Election Committee Special Odd-Year Report O Controlled O Recall Termination Statement (Also Complete Part 5) O Sponsored (Also file a Form 410 Termination) (Also Complete Part 6) Amendment (Explain below) ☐ General Purpose Committee Primarily Formed Candidate/ O Sponsored Officeholder Committee Small Contributor Committee (Also Complete Part 7) O Political Party/Central Committee I.D. NUMBER Treasurer(s) 3. Committee information 1311191 NAME OF TREASURER COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Diane I Flynn Tim Flynn for Mayor MAILING ADDRESS 234 N L St STREET ADDRESS (NO P.O. BOX) CITY AREA CODE/PHONE ZIP CODE 211 N F St CA Oxnard 93030 805-486-8976 CITY AREA CODE/PHONE STATE ZIP CODE NAME OF ASSISTANT TREASURER, IF ANY Oxnard CA 93030 805-340-1922 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS

Statement covers period

#### 4. Verification

OPTIONAL: FAX / E-MAIL ADDRESS

CITY

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

AREA CODE/PHONE

CITY

Executed on Sep 28 2016

Executed on Date

Executed on Date

Executed on Date

ZIP CODE

Ву	11.34	
Sign	nature of Treasurer of Assistant Peas	surer
RV / Man D	A ROLL	
Signature of Controlling Officenology	, Candigate /State-1/56spre-Propene	nt or Responsible Officer of Sponsor
		,
n		
Signature of Control	olling Officeholder, Candidate, State I	Veas: ire Prononent
organization of construction	aiming a moon and an anadato, andia .	Transport of the particular

OPTIONAL: FAX / E-MAIL ADDRESS

Signature of Controlling Officeholder, Candidate, State Measure Proponent

AREA CODE/PHONE

Officeholder or Candidate Con	trolled Committee		6.	Primarily Formed Ballo	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE	oggaci () Militar samara da ser da giftiri AMA kunda saca samara gili kihi Militar da na 2 engili ili Militar da na	resist. Parallel Hand exists you will have been been been a supplied to the supplied that the supplied that		NAME OF BALLOT MEASURE		towards on the first hand by the constraint of the first distance constraint while the development	nus pagas Pinner na una pagas pagas kan	
Tim Flynn								
OFFICE SOUGHT OR HELD (INCLUDE LOCA	TION AND DISTRICT NUMBER	R IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	ON		SUPPORT
Mayor, City of Oxnard				disconfidences west first between executing the filteral and conserved any six and the second and six and deleter				OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. A	ND STREET) CITY	STATE ZIP			-11-1			
211 N F St	Oxnard	CA 93030		Identify the controlling offic	Total Company of the		sure propo	nent, ir any.
especialisti and an autorition of the present interest and a state of the state of	nayye Al-Mathi Kabu da kususa gileye Kon Mathidisi ku nabar yayaya Al-Maharin ka maku ku masu ya 23.56000 da masu wa	nouse NPOAR (PRO) visit execution out used AT (ADA for object sinks a process of ADA FIRST AND a policy accounts of ADA for the		NAME OF OFFICEHOLDER, CAN	NDIDATE, OR PF	ROPONENT		
Related Committees Not Included not included in this statement that are contributions or make expenditures on to	ontrolled by you or are prim			OFFICE SOUGHT OR HELD	necessorie, dels construccione models va septembre	DIST	TRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUN	ABER			and supported that the consequence of the consequence of		MINISTER STATE OF THE STATE OF	
	Pedicinal							
NAME OF TREASURER	CONTR	OLLED COMMITTEE?	7	<ul> <li>Primarily Formed Can officeholder(s) or candidate(s</li> </ul>	didate/Offic	eholder Comm	littee List	names of
		ES NO		**************************************		*		
COMMITTEE ADDRESS STREET AD	DDRESS (NO P.O. BOX)	THE COLUMN		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
CITY	STATE ZIP CODE	AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUI	MBER		NAME OF OFFICEHOLDER OR	^ 4 \$ 1 5 1 1 A T F F	OFFICE SOUGHT	OD HELD	
				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OK HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTR	OLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	
COMMITTEE ADDRESS STREET AI	DDRESS (NO P.O. BOX)	ES NO						SUPPORT OPPOSE
COMMITTEE AUDITEDS STREET AS	DENESS (NO F.O. DOA)			Look as equican to maniful accompany or proceeding any material of the Language and transfer and the process to	NAME OF THE OWNER OW	CONTRACTOR		
CITY	STATE ZIP CODE	AREA CODE/PHONE		£45	ech continues	ion sheets if neces	eeam	
				AM 68	avii vviitiiildi	ivii aliteta li libübb	ooar y	

# Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Summary Page	to whole dollars.	State	July 1 2016	FORM 460
SEE INSTRUCTIONS ON REVERSE		through .	Sep 24 2016	Page3 of22
NAME OF FILER				I.D. NUMBER
Tim Flynn for Mayor 2016				1311191
	Column A Colum	in B	Calendar Year Sur	nmary for Candidates

Contributions Received		TOTAL THIS PERIOD CALENDAR YEAR (FROM ATTACHED SCHEDULES) TOTAL TO DATE		CALENDAR YEAR	Calendar Year Summary for Candidates Running in Both the State Primary and			
Monetary Contributions	\$	17114.50 (800)	\$	18943.50 0	General Elections  1/1 through 6/30 7/1 to Date			
SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2     Nonmonetary Contributions Schedule C, Line 3     TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	·	16314.50 5671.77 21986.27	\$	18943.50 5671.77 24615.27	20. Contributions Received \$ na \$ na  21. Expenditures Made \$ na \$ na			
Expenditures Made  6. Payments Made Schedule E, Line 4  7. Loans Made Schedule H, Line 3	\$	<u>8460.97</u> 0	\$	9114.97	Expenditure Limit Summary for State Candidates			
SUBTOTAL CASH PAYMENTS	\$	8460.97 2483.60 5671.77	\$	9114.97 3453.60 5671.77	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy)			
10. Nonmonetary Adjustment	\$		\$	18240.34				
Current Cash Statement  12. Beginning Cash Balance Previous Summary Page, Line 16  13. Cash Receipts Column A, Line 3 above  14. Miscellaneous Increases to Cash Schedule I, Line 4  15. Cash Payments Column A, Line 8 above  16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15  If this is a termination statement, Line 16 must be zero.		2360.04 16314.50 7.12 8460.97 10226.69	ad At an of an be sh	calculate Column B, d amounts in Column to the corresponding nounts from Column B your last report. Some nounts in Column A may negative figures that ould be subtracted from evious period amounts. If s is the first report being	*Amounts in this section may be different from amounts reported in Column B.			
17. LOAN GUARANTEES RECEIVED			file on fro	ed for this calendar year, ily carry over the amounts im Lines 2, 7, and 9 (if iy).				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	3453.60			FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov			

Schedule A Monetary Contributions Received  SEE INSTRUCTIONS ON REVERSE NAME OF FILER			ts may be rounded whole dollars.	Troffi	2016 24 2016	Page	MBER
Tim Flynn	for Mayor 2016					13111	91
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
7/1/16	Peter Sotelo 2011 Shady Brook Dr Thousand Oaks CA 91362	ØIND COM OTH PTY SCC	California Highway Patrol, retired	100	100		
7/2/16	Jean Gentry & Denny Gherini 219 N F St Oxnard CA 93030	IND COM OTH PTY	retired	100	10	00	
***************************************	Bruce Schoppe	ZIND	President				

President,

FedEx Express

Society

Pilot

retired

Ventura County Audubon

//0/10	2831 Harbor BI Oxnard CA 93035	□ OTH □ PTY □ SCC		150	190	
			SUBTOTAL \$	550		

□сом

□отн

☐ PTY

□scc VIND

□сом

OTH

☐ PTY □scc **Z**IND

COM

#### Schedule A Summary

7/2/16

7/6/16

7/6/16

4805 Mascagni St

Ventura CA 93003

Matt & Rose Colbern

Anchorage AK 99156

Lauraine Effress

2831 Harbor Bl

16048 Hidden Creek Ln

1. Amount received this period – itemized monetary contributions. 12010.00 (Include all Schedule A subtotals.) ......\$\_ 5104.50 2. Amount received this period – unitemized monetary contributions of less than \$100 ......\$ \_\_\_\_ 3. Total monetary contributions received this period. 17114.50 

\*Contributor Codes

IND - Individual

100

100

150

100

100

150

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

Ž	Contributions Received	to whole o	ionars.	from July 1 through Sep 2	-	Page	ORNIA 460  5 of 22		
AME OF FILER  Tim Flynn for Mayor 2016  1311191									
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
7/7/16	Susan Dirrim 422 Palm Dr Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	retired	100	1	00			
7/9/16	Talon Enterprises 613 Eastwood Dr Oxnard CA 93030	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		100	1	00			
7/9/16	Andrej Kozlovskis 1815 N 6th Pl Port Hueneme CA 93041	☑IND □COM □OTH □PTY □SCC	representative BMW Vehicle Preparation Center	100	1	00			
7/9/16	Steven Nash 2211 Laurel Valley Pl Oxnard CA 93036	IND COM OTH PTY SCC	retired	100	1	00			
7/9/16	Lawrence Stein 1965 Falkner Pl Oxnard CA 93033	☑IND □COM □OTH □PTY □SCC	accountant	100	100	.02			
			SUBTOTAL	\$ 500					

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.) Statement covers period **CALIFORNIA FORM** Jul 1 2016 from Page \_\_6\_\_ of \_\_22\_\_\_ Sep 24 2016 through \_

NAME OF FILER

Tim Flynn for Mayor 2016

I.D. NUMBER 1311191

1 11 11 1 1 Y 1 1 1 1 1	or Mayor 2010				1131113	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/9/16	Robert Gagliano 822 Fitzgerald Av Ventura CA 93003	☑IND □COM □OTH □PTY □SCC		100	100	
7/9/16	Kerry & Sean Murphy 3751 Cherry St Ventura CA 93003	IND COM OTH PTY	owner/ Murphy Consulting	100	100	
7/9/16	Alice M Haskins P O Box 1925 Oxnard CA 93032	IND COM OTH PTY	retired	100	100	
7/9/16	Robert V Sanchez 2201 Carob St Oxnard CA 93035	IND COM OTH PTY SCC	administrator/ Social Security Administration	100	100	
7/9/16	Jess J Herrera 2241 Winged Foot Ct Oxnard CA 93036	ZIND COM OTH PTY SCC	member/ Oxnard Harbor District Board	100	100	
SUBTOTAL\$ 500						

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

**FORM** 

Statement covers period

Jul 1 2016

				fromJul 1 :	2016	FC	DRM TOO	
				through Sep 2	24 2016	Page _	7 of 22	
NAME OF FILER		······································			I.D. NU	MBER		
Tim Flynn fo	or Mayor 2016					13111	91	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
7/9/16	Timothy Hirschberg 5021 Verdugo Wy, Ste 105 Camarillo CA 93010	☑IND □COM □OTH □PTY □SCC	attorney County of Ventura	100	1	00		
7/9/16	Jane Coffman 60 N Joanne Ventura CA 93003	IND COM OTH PTY	retired	100	1	00		
7/9/16	Patrick M Forrest 3317 Ocean Dr Oxnard CA 93035	ZIND COM OTH PTY SCC	retired	100	1	00		
7/9/16	James Susha 2207 Eastridge Ct Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	retired	200	2	:00		
7/9/16	L & L Painting Inc 5247 Whitecap St Oxnard CA 93035	ZIND COM OTH PTY SCC		150	1	50		
	SUBTOTAL\$ 650							

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

Jul 1 2016

				18 C/8 2 8	**************************************		
				through <u>Sep 2</u>	24 2016	_	8 of 22
NAME OF FILER	I.D. NUI	//BER					
Tim Flynn fo	or Mayor 2016				13111	91	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/9/2016	Hisako Owen-Wilson & Charles Wilson 2701 Wood Opal Wy Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	retired	1000	1000		
7/9/2016	Ann B Jourdan P O Box 7569 Ventura CA 93006	☑IND □COM □OTH □PTY □SCC	self-employed/accountant	250	2	50	
7/9/2016	Anthony & Kristine Behrens 2731 Poli St Ventura CA 93003	IND COM OTH PTY	self-employed/ Anthony Behrens business services	150	1	50	
7/9/2016	Diane Delaney 2045 San Sebastian Dr Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	real estate agent/ RE/MAX Gold Coast	300	3	00	
7/9/2016	Donna & Brian Henggeler 1961 Del Ciervo Pl Camarillo CA 93010	IND COM OTH PTY	co-owner/ Dominick's Italian Restaurant	250	2	50	

SUBTOTAL \$

1950

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement covers period	CALIFORNIA 460
		fromJul 1, 2016	FORM 400
		through <u>Sep 24 2016</u>	Page 9 of 22
NAME OF FILER			I.D. NUMBER
Tim Flynn for Mayro			

111111 171111111	n way to					The state of the s	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
7/9/2016	Robert and Helen Valles P O Box 50302 Oxnard CA 93031	☑IND □COM □OTH □PTY □SCC	retired	300	300		
7/9/2016	Helen Gunderson 3477 Fairmont Dr Ventura CA 93003	☑IND □COM □OTH □PTY □SCC	case mgr/Community Memorial Hospital	200	200		
7/9/2016	Channel Islands Cremation Ventura 200 N C St Oxnard CA 93030	☐IND ☐COM ØOTH ☐PTY ☐SCC		200	200		
7/9/2016	Joe De La Torre 2261 Mariposa St Oxnard CA 93036	IND COM OTH PTY SCC	owner/ business services	200	200		
7/9/2016	Gina Harris P O Box 1933 Camarillo CA 93011	IND COM OTH PTY	office mgr/SoCalGold Products	105	105		
SUBTOTAL \$ 1005							

\*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

P O Box 6432

Alex Skupien

David N Cook

Oxnard CA 93031

Oxnard CA 93035

5252 Breakers Wy

Oxnard CA 93035

4125 Harbour Island Ln

Amounts may be rounded to whole dollars.

ОТН

PTY □scc

Z IND

□отн

PTY

SCC Z IND

COM

□отн

PTY scc SCHEDULE A (CONT.)

Monetary Contributions Received				from Jul 1 :	•	FORM 460  Page 10 of 22	
NAME OF FILER	A A A COLOR					I.D. NUMBER	
Tim Flynn fo	oriviayor		Market			13111	9.1
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
7/9/2016	D J Paumier 1930 Westchester Ct Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	dentist/David J Paumier DDS	105	105		
7/9/2016	Diane & John Flynn 234 N L St Oxnard CA 93030	☑IND □ COM □ OTH □ PTY □ SCC	retired	1000	1000		
7/0/2016	Barbara Macri-Ortiz	☑ IND □ COM	attorney/Law Office of	100		^^	

Barbara Macri-Ortiz

Manager/Software

SUBTOTAL \$

Technical

Engineer

retired

\*Contributor Codes

IND - Individual

7/9/2016

7/16/2016

8/14/16

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

100

500

100

100

500

100

1805

Richard & Elizabeth Beal

Thomas & Anita Petersen

2141 Kingsbridge Wy

Oxnard CA 93035

1479 Estuary Wy

Oxnard CA 93035

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

100

1000

2300

				from July 1	2016	FC	ORM TOO
				through Sep 2	24 2016	Page _	11 of 22
NAME OF FILER						I.D. NU	MBER
Tim Flynn fo	or Mayor 2016					13111	91
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR YEAR		PER ELECTION TO DATE (IF REQUIRED)
7/15/2016	Margaret Tatum Potter 1168 S G St Oxnard CA 93033	IND COM OTH PTY	retired	100	170		
8/6/2016	Law Offices of Richard Francis 711 S A St Oxnard CA 93030	☐IND ☐COM ØOTH ☐PTY ☐SCC		1000	1000		
8/7/2016	Barbara A Wilk 1560 Twin Tides PI Oxnard CA 93035	IND COM OTH PTY	self-employed entrepreneur	100	1	00	

attorney

brokers

E J Gallo Winery

Valkyrie Yachts

SUBTOTAL \$

IND COM

□ PTY □ SCC

☐ COM

□отн

□ PTY □ SCC

\*Contributor Codes

IND - Individual

8/7/2016

8/7/2016

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

100

1000

Amounts may be rounded to whole dollars.

					(	,
Statement covers period		CALI	FORN	Α	16	lacksquare
from	July 1 2016	CALIFORNI FORM			υ	U
					10000	
through	Sep 24 2016	Page _	12	of_	22	
		I.D. NU	MBER			

NAME OF FILER

Tim Flynn for Mayor 2016

1311191

SCHEDULE A (CONT.)

111111 19111111	JI Mayor 2010	Survey v			115111	/ I	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
8/7/2016	Philip Vass 4127 W Hemlock Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	new car dealer LRG Ventura	1000	1000		
8/7/2016	Shawn Duffy 3529 Sunset Ln Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	airline pilot American Airlines	150	150		
8/7/2016	Angela Slaff 5131 Wavecrest Wy Oxnard CA 93035	IND COM OTH PTY SCC	retired	100	100		
8/7/2016	Scott D Bernstein Attorney At Law 1237 S Victoria Av #510 Oxnard CA 93035	□IND □COM ☑OTH □PTY □SCC		250	250		
8/7/2016	Martin Distributors P O Box 55219 Valencia CA 91385	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		500	500		
SUBTOTAL\$ 2000							

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

**CALIFORNIA** 

Statement covers period

				from July 1	2016	FC	DRM 400		
				through <u>Sep 2</u>	24 2016	Page _	13 of 22		
NAME OF FILER						I.D. NUN	MBER		
Tim Flynn f	for Mayor 2016					131119	91		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
8/10/2016	A G Marcus 22817 Ventura BI #496 Woodland Hills CA 91364	☑IND □COM □OTH □PTY □SCC	retired	100	100		100		
8/11/16	Okada Chiropractic 1300 W Gonzales Rd #105 Oxnard CA 93030	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		250	250				
8/12/16	Audrey M Keller 1237 S Victoria Av Ste 504 Oxnard CA 93035	IND COM OTH PTY	partner Keller Partners LLC	100	100				
8/23/16	Janis McCormick & Michael Stubblefield 1230 E Collins St Oxnard CA 93036	IND COM OTH PTY SCC	retired	200	200				
8/30/16	David & Karen Brooks 5047 Corbina Way Oxnard CA 93035	☑IND □ COM □ OTH □ PTY □ SCC	architect David Brooks, architect	100	1	00			

SUBTOTAL \$

750

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

	Δm	ounts may be rou	ındəd				SCHE	DULE B - PART 1	
Schedule B – Part 1	~~!!!	to whole dollars			Statement	covers period	CALIFORN	<sup>IIA</sup> 460	
_oans Received					from J	ıly 1 2016	FORM 400		
				and the same of th					
SEE INSTRUCTIONS ON REVERSE					through	Sep 24 2016	Page14	of 22	
AME OF FILER			**************************************				I.D. NUMBER		
Tim Flynn for Mayor 2016							1311191	e very Lucia and Children in the Children in t	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(6) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIVI THIS PERIO	EN. CLOSE OF T	AT PAID THIS	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Timothy B Flynn	Mayor, City of Oxnard			☑ PAID		^	000	CALENDAR YEAR	
211 N F St Oxnard CA 93030	Teacher, Oxnard Union High School District			\$ 800		O O %	\$ <u>800</u>	\$ 800 PER ELECTION**	
DIND □ COM □ OTH □ PTY □ SCC		\$800	s0		0 na DATE DUE	\$0	6/7/16 DATE INCURRED	s <u>na</u>	
	***************************************			☐ PAID				CALENDAR YEAR	
			· ·	\$ FORGIVEN	\$	RATE %	\$	\$PER ELECTION**	
<sup>†</sup> □IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	s0	DATE INCURRED	\$	
			-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P-P	☐ PAID		Trickless controlled	A THE STATE OF THE	CALENDAR YEAR	
				\$	\$	%	\$	\$	
				FORGIVEN	4	Neu E	pichaman pip pichin	PER ELECTION**	
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\\$	DATE INCURRED	\$	
		SUBTOTALS S	0	\$ 80	00 \$	0 \$ 0	)		
Schedule B Summary						(Enter (e) on Schedule E, Line 3	)		
Loans received this period  (Total Column (b) plus unitemized loar				\$		_0_		THE RESIDENCE OF THE PROPERTY	
<ol> <li>Loans paid or forgiven this period</li> <li>(Total Column (c) plus loans under \$1 (Include loans paid by a third party that</li> </ol>	00 paid or forgiven.)			\$_	8	00_	Contributor Code ND – Individual COM – Recipient ( (other thar DTH – Other (e.g. PTY – Political Pa	Committee PTY or SCC) , business entity)	
<ol><li>Net change this period. (Subtract Lin Enter the net here and on the Summa</li></ol>				NET \$ _	(81) (May be a negative nur	<u>, vo</u>		ributor Committee	

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Schedul Nonmor	le C netary Contributions Received		Amounts may be rounded to whole dollars.		S	tatement covers p		CALIFO FOR	CHANGE CONTRACTOR AND
	TIONS ON REVERSE				thro	ugh Sep 24 2	2016	Page	15 of <u>22</u>
NAME OF FILE	R							I.D. NUMB	ER
Tim Flyni	n for Mayor 2016				an and a superior of the super			131119	1
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SER		AMOUNT/ FAIR MARKET VALUE	CALEN	LATIVE TO DATE DAR YEAR I - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
7/9/16	Dominicks Italian Restaurant 477 N Oxnard Blvd Oxnard CA 93030	□IND □COM □OTH □PTY □SCC		italian bread and salad for fundraiser		150		150	
7/9/16	Tandem Brewery LLC 1009 Harbor Blvd Oxnard CA 93035	□IND □COM □OTH □PTY □SCC		beer tasting a service personnel for fundraiser		755		755	
7/15/16	Fausset Printing 1799 Eastman Av Ventura CA 93003	☐IND☐COM☐OTH☐PTY☐SCC		invitations for fundraiser	•	150		150	,
7/9/16	GForce Printing & Graphics 3401 W 5th St, Suite 120 Oxnard 93030	□IND □COM □OTH □PTY □SCC		banners		180		180	
Attach ad	ditional information on appropriately labeled	continuation	sheets.	SUBT	OTAL S	1235			
1. Amount	e C Summary received this period – itemized nonmonetal				\$_	5671.77	IN	Contributor Co ID – Individual OM – Recipiel	1

2. Amount received this period – unitemized nonmonetary contributions of less than \$100 ......\$

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)......TOTAL \$ \_

3. Total nonmonetary contributions received this period.

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

PTY - Political Party

5671.77

(other than PTY or SCC)
OTH – Other (e.g., business entity)

Schedule C	Amounts may be rounded to whole dollars.		SCHEDULE				
Nonmonetary Contributions Received	to whole dollars.	Statement covers period from Jul 1 2016	CALIFORNIA 460				
SEE INSTRUCTIONS ON REVERSE		through Sep 24 2016	Page 16 of 22				
NAME OF FILER		The state of the s	I.D. NUMBER				
Tim Flynn for Mayor 2016			1311191				

	1 , o . (v, u, y o . muo . o					. I	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
7/9/16	Coasted Events 164 Arcade Dr Ventura CA 93003	□IND □COM □OTH □PTY □SCC		Event Production	400	400	
8/7/16	Mrs. G. Harris P O Box 1933 Camarillo CA 93011	IND COM OTH PTY SCC	office manager SoCalGold products	FND	150	150	
8/7/16	Tandem Brewery LLC 1009 Harbor Blvd Oxnarfd CA 93035	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		beer tasting and service personnel for fundraiser	755	1510	
7/1-9/24	Fred and Gail Rosenmund 2816 Rice Rd Oxnard CA 93030	IND COM OTH PTY	attorney Rosenmund Baio & Morrow	sign services rendered for sto- rage,construction & installation	2500	2500	
Attach add	ditional information on appropriately labeled						

Schedule C Summary

ques .	Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	continuation -
2.	Amount received this period – unitemized nonmonetary contributions of less than \$100	see previous
3.	Total nonmonetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	page_

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Schedu Nonmoi	le C netary Contributions Received		Amounts may be rounded to whole dollars.		St from	atement covers p		CALIFO FOI	
	TIONS ON REVERSE				throu	igh <u>Sep 24 2</u>	2016	Page	17 of 22
NAME OF FILE	R							I.D. NUME	BER
Tim Flyni	n for Mayor 2016				Share			131119	1
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION O GOODS OR SERVIO		AMOUNT/ FAIR MARKET VALUE	DA	TIVE TO TE AR YEAR DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
various	John & Diane Flynn 234 N L St Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	retired	campaign hats lunches for volunteers, building supplie	-	631.77		631.77	
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
Attach ad	ditional information on appropriately labeled	continuation	sheets.	SUBTO	TAL \$	631.77			
C-landari	a 0 C	**************************************							
1. Amount	e C Summary received this period – itemized nonmoneta all Schedule C subtotals.)				\$	continuation	IND		I nt Committee
2. Amount	received this period - unitemized nonmone	etary contribut	ions of less than \$100		\$	sheet #2	OTI		nan PTY or SCC) e.g., business entity)
	nmonetary contributions received this periones 1 and 2. Enter here and on the Summan		mn A, Lines 4 and 10.)	TOTA	L \$ _	see p. 15			ontributor Committee

							S	CHEDULE E
Schedule E	•	Amounts may be rounded to whole dollars.  Statement covers period C/			CALIFO	DRNIA	460	
Payments Made				from	July 1 2016	FOR	MS	700
SEE INSTRUCTIONS ON REVERSE				through _	Sep 24 2016	Page	18 of	22
NAME OF FILER					ny fivonina ny taona 2004-2004. Ny fivondrona ny indrindrona ny fivondrona ny fivondro	I.D. NUMI	BER	
Tim Flynn for Mayor 2016						131119	1	
CODES: If one of the following codes accurately describe  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	s the payment, you MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and so POS postage, deliv PRO professional so PRT print ads	munications d appearances ses ating urvey researc very and mes	h senger services	RAD radio RFD retur SAL cam TEL t.v. o TRC cand TRS staff, TSF trans VOT vote	ribe the payment.  a airtime and production of the contributions paign workers' salaries or cable airtime and production airtime and production the contribution of th	uction costs I meals and meals of the same	e candidat	e/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR .	DESCRIPTION OF F	PAYMENT	an major ang paga ng Basan ng	AMO	JNT PAID
Nationbuilder 520 S Grand Avenue 2nd Flr Los Angeles CA 90071		CNS					Andrews and Andrew	133.73
Costco 2001 E Ventura BI Oxnard CA 93030		FND						1103.32
John Coffman 465 S Ashwood Ventura CA 93003		FND						180.00
* Payments that are contributions or independent expenditures must also b	e summarized on Sche	edule D.			SU	BTOTAL S	}	1417.05
Schedule E Summary								
Itemized payments made this period. (Include all Schedul	e E subtotals.)	**********	*****************		• • • • • • • • • • • • • • • • • • • •	\$	7:	381.59
2. Unitemized payments made this period of under \$100	************	********	************************	*******************	************************	\$	1	079.08
3. Total interest paid this period on loans. (Enter amount from								0
4. Total payments made this period. (Add Lines 1, 2, and 3.		•						460.97

Schedule		
(Continua	tion	Sheet)
<b>Pavments</b>	Mac	ie .

SCHE	DULE	E(C	ONT.)
------	------	-----	-------

(Continuation Sheet)	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460		
Payments Made		fromJuly 1 2016	FORM TOU		
SEE INSTRUCTIONS ON REVERSE		through Sep 24 2016	Page		
NAME OF FILER			I.D. NUMBER		
Tim Flynn for Mayor 2016			1311191		

CODES: If one of the following codes accurately de	scribes the payment, you may enter the code.	. Otherwise, describe the payment.
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries

CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research

independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor

PRO professional services (legal, accounting) LEG legal defense VOT voter registration campaign literature and mailings

PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Smart and Final 2021 Oxnard Blvd Oxnard CA 93036	FND		359.62
Oxnard Historic Farm Park 1251 Gottfried Pl Oxnard CA 93036	FND		550.00
Oxnard Chamber of Commerce 400 E Esplanade Dr #302 Oxnard CA 93036		State of the City address and Candidate forum	110.00
Fausset Printing 1799 Eastman Av Ventura CA 93003	LIT		1590.00
* D	1	CUIDTOTA	

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

2609.62

Schedule E	Amarinia marika varindad		SCHEDULE E (COI				
(Continuation Sheet)	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460				
Payments Made		from Jul 1 2016	FORM 400				
SEE INSTRUCTIONS ON REVERSE		through Sep 24 2016	Page 20 of 22				
NAME OF FILER			I.D. NUMBER				
Tim Flynn for Mayor 2016			1311191				

	reconstruction and annual department of			
CODES: If one of the following codes accurately describes the pay			· -	
CNS campaign consultants MTG me CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  MTG me OFC off OFC		appearance s ting vey researd ery and mes	SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals th TRS staff/spouse travel, lodging, and meals senger services TSF transfer between committees of the same	e candidate/sponsor
LEG legal defense PRO pr LIT campaign literature and mailings PRT pr		ervices (leg	al, accounting) VOT voter registration WEB information technology costs (internet, e-	mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Oxnard City Clerk 300 W 3rd St Oxnard CA 93030		FIL		1300.00
Staples 411 W Esplanade Dr Oxnard CA 93036		OFC		207.09
Timothy B Flynn 211 N F St Oxnard CA 93030			Repayment of loan \$800 payment of accrued expense for postage \$470	- 1270.00
Tandem Brewery 1109 Harbor Blvd Oxnard CA 93035		FND		· 285.00
BG's Cafe 438 S A St Oxnard CA 93030		MTG		- 293.13

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 3355.22

			SCHEDULE
Schedule F	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
Accrued Expenses (Unpaid Bills)	to windle wondrot	from July 1 2016	FORM 400
		through Sep 24 2016	Page 21 of 22
SEE INSTRUCTIONS ON REVERSE			
NAME OF FILER			I.D. NUMBER
Tim Flynn for Mayor 2016			1311191
CODES: If one of the following codes accurately describe	s the payment, you may enter the code. Other	erwise, describe the payment.	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production of	osts
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions	
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries	
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and produ	
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and	
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, a	
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services		of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration	
LIT campaign literature and mailings	PRT print ads	WEB information technology costs	(internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Oxnard Historic Farm Park Foundation 691 N Rice Avenue Oxnard CA 93030	FND deposit	550	0	550	0
COGS South Signs 3309 S Main St Santa Ana CA 92707	outdoor advertising	0	3033.60	0	3033.60
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 550	\$ 3033.60	550	\$ 3033.60

#### **Schedule F Summary**

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	\$ 3033.60
Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	<i>EE</i> 0

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

NET \$ 2483.60

Schedule I		Amounts may be rounded to whole dollars.		SCHEDULE	
Miscellaneous In	creases to Cash			Statement covers period from July 1 2016	CALIFORNIA 460
				through Sep 24 2016	Page 22 of 22
Tim Flynn for Mayor 2016					I.D. NUMBER
					1311191
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DESCRIPTION OF RECEIPT		AMOUNT OF INCREASE TO CASH
ar and a second					
No. The Control of th		15 Hard			Are construction of the co
vicina.					
Option to the state of the stat					
Since the second		TO THE PARTY OF TH			
No. of the control of		The second secon			
Attach additional information on appropriately labeled continuation sheets.				L \$	
Schedule I Summ	nary				
1. Itemized increases to cash this period.					0
2. Unitemized increases to cash of under \$100 this period.				\$	2
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)\$					0
	s increases to cash this period. (Add Lines 1, 2, and ne 14.)			TOTAL \$7.1	<u>2</u>