Recipient Committee
Campaign Statement
Cover Page

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   - Officeholder, Candidate Controlled Committee
     - State Candidate Election Committee
     - Recall
       (Also Complete Part 5)
   - General Purpose Committee
     - Sponsored
     - Small Contributor Committee
       (Also Complete Part 6)
   - Primarily Formed Ballot Measure Committee
     - Controlled
     - Sponsored
   - Primarily Formed Candidate/Officelholder Committee
     (Also Complete Part 7)

2. Type of Statement:
   - Preselection Statement
   - Semi-annual Statement
   - Termination Statement
     (Also file a Form 410 Termination)
   - Amendment (Explain below)

3. Committee Information
   - COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
     Miguel Lopez for Oxnard Mayor 2016
   - STREET ADDRESS (NO P.O. BOX)
     1237 S. Victoria Ave. #191
   - CITY
     Oxnard
   - STATE
     CA
   - ZIP CODE
     93035
   - Mailing Address:
     1237 S. Victoria Ave. #191
   - CITY
     Oxnard
   - STATE
     CA
   - ZIP CODE
     93035
   - NAME OF TREASURER
     Eva E. Lopez
   - MAILING ADDRESS
     1237 S. Victoria Ave. #191
   - CITY
     Oxnard
   - STATE
     CA
   - ZIP CODE
     93035
   - E-MAIL ADDRESS
     miguellopezforoxnard@gmail.com

4. Verification
   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.
   - Date: 9/29/16
   - Signature of Treasurer or Assistant Treasurer
     Miguel Lopez
   - Date: 9/29/16
   - Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
     Miguel Lopez
   - Date: 9/29/16
   - Signature of Controlling Officeholder, Candidate, State Measure Proponent
     Miguel Lopez
   - Date: 9/29/16
   - Signature of Controlling Officeholder, Candidate, State Measure Proponent
     Miguel Lopez

FPCC Form 460 (Jan/2016)
FPCC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Miguel Lopez

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Mayor, City of Oxnard

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
1237 S. Victoria Ave. #191 Oxnard, CA 93035

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

SUPPORT
OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD
SUPPORT
OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD
SUPPORT
OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD
SUPPORT
OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD
SUPPORT
OPPOSE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

Attach continuation sheets if necessary

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www.fppc.ca.gov
## Campaign Disclosure Statement

### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$2,891.00</td>
<td>$3,510.00</td>
</tr>
<tr>
<td>Loans Received</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL CONTRIBUTIONS RECEIVED</strong></td>
<td>$2,891.00</td>
<td>$3,510.00</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$4,064.52</td>
<td>$4,126.67</td>
</tr>
<tr>
<td>Loans Made</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL EXPENDITURES MADE</strong></td>
<td>$4,064.52</td>
<td>$4,126.67</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$2,891.00</td>
<td></td>
</tr>
<tr>
<td>Cash Receipts</td>
<td></td>
<td>$3,114.11</td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash Payments</td>
<td>$4,064.52</td>
<td></td>
</tr>
<tr>
<td><strong>ENDING CASH BALANCE</strong></td>
<td>$4,160.67</td>
<td></td>
</tr>
</tbody>
</table>

### Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/30</td>
<td>$556.85</td>
</tr>
</tbody>
</table>

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Equivalents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outstanding Debts</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

<table>
<thead>
<tr>
<th>Month</th>
<th>Contributions Received</th>
<th>Expenditures Made</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1 through 6/30</td>
<td>$2,891.00</td>
<td>$4,064.52</td>
</tr>
<tr>
<td>7/1 to Date</td>
<td>$3,510.00</td>
<td>$4,126.67</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.

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**RETURN TO INSTRUCTIONS ON REVERSE**
Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/1/16</td>
<td>Alexander Hamilton &amp; Hayley Hamilton 130 Bonita Court, Ventura, CA 93001</td>
<td>IND</td>
<td>City of Oxnard</td>
<td>$200.00</td>
<td>$200.00</td>
<td></td>
</tr>
<tr>
<td>7/1/16</td>
<td>Johnathan B Cantalupe &amp; Leticia Lopez 2617 Vista Loop Oxnard, CA 93036</td>
<td>IND</td>
<td>Actionpac Sales &amp; Automation</td>
<td>$100.00</td>
<td>$100.00</td>
<td></td>
</tr>
<tr>
<td>7/10/16</td>
<td>Maria Teresa Salazar &amp; Esteban Salazar 131 Dolores Ct. Oxnard, CA 93030</td>
<td>IND</td>
<td></td>
<td>$100.00</td>
<td>$100.00</td>
<td></td>
</tr>
<tr>
<td>7/14/16</td>
<td>Harry D. Cortez 3751 Via Marina Ave. Oxnard, CA 93035</td>
<td>IND</td>
<td></td>
<td>$100.00</td>
<td>$100.00</td>
<td></td>
</tr>
<tr>
<td>7/15/16</td>
<td>Eva E. Lopez 2541 Taffrail Ln. Oxnard, CA 93035</td>
<td>IND</td>
<td>Retired</td>
<td>$500.00</td>
<td>$500.00</td>
<td></td>
</tr>
</tbody>
</table>

SUBTOTAL: $1,000.00

Schedule A Summary
1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ........................................... $1,000.00
2. Amount received this period – unitemized monetary contributions of less than $100 ................. $1,891.00
3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................. TOTAL $2,891.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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## Schedule E
### Payments Made

**Amounts may be rounded to whole dollars.**

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>Page 5 of 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 7/1/16 through 9/24/16</td>
<td>I.D. NUMBER: 1387287</td>
</tr>
</tbody>
</table>

### SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**
Miguel Lopez for Oxnard Mayor 2016

### CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- **CMP** campaign paraphernalia/misc.
- **CNS** campaign consultants
- **CTB** contribution (explain nonmonetary)*
- **CVC** civic donations
- **FIL** candidate filing/ballot fees
- **FND** fundraising events
- **IND** independent expenditure supporting/opposing others (explain)*
- **LEG** legal defense
- **LIT** campaign literature and mailings
- **MBR** member communications
- **MTG** meetings and appearances
- **OFC** office expenses
- **PET** petition circulating
- **PHO** phone banks
- **POL** polling and survey research
- **POS** postage, delivery and messenger services
- **PRO** professional services (legal, accounting)
- **PRT** print ads
- **RAD** radio airtime and production costs
- **RFD** returned contributions
- **SAL** campaign workers' salaries
- **TEL** t.v. or cable airtime and production costs
- **TRC** candidate travel, lodging, and meals
- **TRS** staff/spouse travel, lodging, and meals
- **TSF** transfer between committees of the same candidate/spONSOR
- **VOT** voter registration
- **WEB** information technology costs (Internet, e-mail)

### NAME AND ADDRESS OF PAYEE

<table>
<thead>
<tr>
<th>Name and Address of Payee</th>
<th>Code or</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>RG Pacific LLC</td>
<td>WEB</td>
<td>Web Page</td>
<td>$750.00</td>
</tr>
<tr>
<td>Eazel Printing</td>
<td>CMP</td>
<td>Printing</td>
<td>$3,137.40</td>
</tr>
<tr>
<td>1st Imprint Oxnard</td>
<td>CMP</td>
<td>Printing</td>
<td>$177.12</td>
</tr>
<tr>
<td>1325 W. Gonzales Rd.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxnard, CA 93036</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ........................................ $ 4,064.52
2. Unitemized payments made this period of under $100.................................................................................. $ 
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......................... $ 
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $ 4,064.52

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