Executed on ...

Executed on -

Received Oxnard City Clerk

Date of election if applicable:

CALIFORNIA 460 **FORM**

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Page	1	of	17

For Official Use Only

(Month, Day, Yank OCT 27 Sep 25 2016 from Oct 22 2016 Nov 8 2016 SEE INSTRUCTIONS ON REVERSE through 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 2. Type of Statement: ✓ Preelection Statement Officeholder, Candidate Controlled Committee ☐ Primarily Formed Ballot Measure Quarterly Statement State Candidate Election Committee Committee Semi-annual Statement Special Odd-Year Report O Controlled ○ 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 3. Committee Information Treasurer(s) 1311191 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Diane | Flynn Tim Flynn for Mayor MAILING ADDRESS 234 N L St STREET ADDRESS (NO P.O. BOX) CITY ZIP CODE AREA CODE/PHONE 211 N F St CA 805-486-8976 Oxnard 93030 CITY STATE ZIP CODE AREA CODE/PHONE 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 CITY ZIP CODE AREA CODE/PHONE CITY ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 periury under the laws of the State of California that the foregoing is Oct 27 2016 Executed on a Date Oct 27 2016 Executed on a

Statement covers period

leasure Proponent or Responsible Officer of Sponsor

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

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Page_		_ 01		[

. Officeholder or Candidate	Controlled Committee		6.	. Primarily Formed Ballo	t Measure	Committee		
NAME OF OFFICEHOLDER OR CAND	DIDATE	non-occurry and the first or occurry and any and the first of the state of the stat		NAME OF BALLOT MEASURE	nder der gegetzte der Anders der Belle der Greine der Greine der Greine der Greine der Greine der Greine der G	TOP NOTE TO SELECTIVE CONTRACTOR SELECTIVE SEL	CONTRACTOR STREET	
Tim Flynn								
OFFICE SOUGHT OR HELD (INCLUD	E LOCATION AND DISTRICT NUM	BER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIC	N] SUPPORT
Mayor, City of Oxnard				AVERHADOS NAMES AND SECURIO SECURIO SECURIO SE SECURIO SE] OPPOSE
RESIDENTIAL/BUSINESS ADDRESS	(NO. AND STREET) CITY	STATE ZIP		b.b., 426, 48,				
211 N F St	Oxnard	CA 93030		Identify the controlling office	rectors and the second section of the section		easure prop	onent, ir any.
Charles processing the comprehensive constitution of the constitut	erzekt in deren serien er geleg der	TANNANGAN MANAYAN KATINI KATINI KATINI MANANGAN MANANGAN MANANGAN MANANGAN MANANGAN MANANGAN MANANGAN MANANGAN		NAME OF OFFICEHOLDER, CAN	DIDATE, OR PR	OPONENT		
Related Committees Not I not included in this statement that contributions or make expenditure	t are controlled by you or are p	rimarily formed to receive		OFFICE SOUGHT OR HELD	et er Authorites yn Y Enwest (alle feweren berenne ser bl		DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. 1	NUMBER					og torredte såredreppy gyddenness gyby filminannes penn	ESCHEROLISCHE EN PROPERTY AND
NAME OF TREASURER	CON	NTROLLED COMMITTEE?	7	 Primarily Formed Cand officeholder(s) or candidate(s) 	lidate/Offic	eholder Con	nmittee Li	st names of
		YES NO						
COMMITTEE ADDRESS STR	REET ADDRESS (NO P.O. BOX)	му в насельной чености на поставления подости на применения по поставления по поставления по поставления по по		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
CITY	STATE ZIP CODE	AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGI	HT OR HELD	
						200		SUPPORT OPPOSE
COMMITTEE NAME	I.D.	NUMBER		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUG	HT OR HELD	
AND DESCRIPTION OF THE PROPERTY OF THE PROPERT								SUPPORT OPPOSE
NAME OF TREASURER		NTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT
COMMITTEE ADDRESS ST	REET ADDRESS (NO P.O. BOX)	YES NO						OPPOSE
OCIMINITY EE ALDRESS 518	REE! ADDRESS (NO F.O. BOX)				THE RESIDENCE OF THE PERSON OF		CONTROL OF STRUCTURE	AND
CITY	STATE ZIP CODE	AREA CODE/PHONE		A 44.	ach continues	ion sheets if ne	rassarı	
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Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

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State	ment covers period Sep 25 2016	california 460
through _	Oct 22 2016	
		I.D. NUMBER
		1311191

Tim Flynn for Mayor 2016			1311191			
Contributions Received	COLUMN A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES	COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and			
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 6962	0 0 2 s 25905.50 0 9071.97	General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$ na \$ na 21. Expenditures Made \$ na \$ na			
Expenditures Made 6. Payments Made	\$ 10077.7; <1445; 340;	0 0 2 \$ 2 19192.69 > 1588 0 9071.77	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election (mm/dd/yy)			
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.	10077.7	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If	*Amounts in this section may be different from amounts reported in Column B.			
17. LOAN GUARANTEES RECEIVED	\$	this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov			

Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

Monetary Contributions Received		10	whole donais.	Statement covers period from Sep 25 2016		california 460	
SEE INISTRI ICTIC	ONS ON REVERSE			through Oct	22 2016	Page	4of17
NAME OF FILER	ING ON REVERSE					I.D. NU	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 CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/30/16	Warner & Patricia Younis 2215 Knightsbridge Lane Channel Islands Harbor CA 93035	IND COM OTH PTY	owners The Bridge Group	· 100	1	00	
9/30/16	Gary K Noreen 5106 Sealane Wy Oxnard CA 93035	IND COM OTH PTY	retired	200	200		
9/30/16	Law Offices of Jon F Monroy 32123 Lindero Canyon Rd No. 301 Westlake Village CA 91361	☐ IND ☐ COM Ø OTH ☐ PTY ☐ SCC		250	2	50	
9/30/16	Natalie Bruton 1207 Buena Vista St Ventura CA 93001	IND COM OTH PTY	product developer NeuroVisionMedical.com	100	4	00	
9/30/16	David Laufer 5147 Corbina Wy Oxnard CA 93035	IND COM OTH PTY	self-employed Laufer Insurance Services	100	1	00	
			SUBTOTAL S	750			
1. Amount re	A Summary eceived this period – itemized monetary contributions II Schedule A subtotals.)		\$		IND.		
2. Amount re	eceived this period – unitemized monetary contributio	ns of less tha	ın \$100\$	2053			(e.g., business entity)
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line	1.) TOTAL \$	6962		- Small	Contributor Committee

Amounts may be rounded to whole dollars

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole d	ollars.	Statement of	overs period	CALI	CALIFORNIA 460		
				from Sep	25 2016	FORM 400			
				through O	ot 22 2016	Page _	5 of 17		
NAME OF FILER						I.D. NU	MBER		
Tim Flynn	for Mayor 2016					13111	91		
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTR	IBUTOR CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE		PER ELECTIC	NC	

,		vorceans a visit a real forms and a second second				
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)
10/1/16	Darlene & Jerry Serros 2120 Ironbark Dr Oxnard CA 93036	☑IND □COM □OTH □PTY □SCC	retired	500	500	
10/15/16	Deirdre Frank 5244 Seabreeze Wy Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	attorney Law Offices of Deidre Frank	200	300	
10/18/16	Maria C Ramirez 631 Ivywood Dr Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	self-employed lawyer	100	199	
10/18/16	Jerry & Charlotte Lucero 751 Hermosa Wy Oxnard CA 93036	IND COM OTH PTY SCC	retired	70	140	
10/19/2016	Harold & Marie Stewart 1705 Dunsmuir St Oxnard CA 93035	IND COM OTH PTY SCC	retired	100	100	
			SUBTOTAL	\$ 970		

*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.)

CALIFORNIA 460

Statement covers period

				from Sep 25	2016	FC)RM	-100
				through Oct 2	22 2016	Page _		f
NAME OF FILER						I.D. NUI	MBER	_
Tim Flynn fo	r Mayor 2016				500.74110 M.N. 7300.040 M.DOOM R.B. 1000.7220.01	13111	91	70.000 000 07724 120.000 0773 1102 0704 0705 0705 0705
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	TO	ELECTION DATE EQUIRED)
10/19/2016	Judith A Takahara 2009 Newcastle Dr Oxnard CA 93036	☑IND □COM □OTH □PTY □SCC	retired	99	1	98		
10/19/2016	Edward & Elaine Gurrola 4101 Romany Dr Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	retired real estate investors	100	4	00		
10/19/2016	Eugene J & Patricia L West 501 Deodar Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	retired	70	2	70		
10/20/2016	Timothy D Hirschberg 5255 Corte Estima #58 Camarillo CA 93012	IND COM OTH PTY SCC	senior attorney County of Ventura	100	2	200		
10/20/2016	William Schneberg 674 County Square Dr #305 Ventura CA 93003	☑IND □COM □OTH □PTY □SCC	self-employed attorney	100	1	00		
			SUBTOTAL	\$ 469				

*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.)

CALIFORNIA / CO

Statement covers period

				from July 25	2016	FO	RM TOO
				through Oct 2	2 2016		7 of 17
NAME OF FILER						I.D. NUN	
Tim Flynn fo	or 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 YI (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/30/2016	Lizza & Jeremy Flynn 34150 Starpoint St Temecula CA 92592	☑IND □COM □OTH □PTY □SCC	vice president sales Eldorado Stone	100	1	00	
10/2/2016	Attila & Claire Taluy P O Box 7657 Oxnard CA 93031	☑IND □COM □OTH □PTY □SCC	engineer FileYourTaxes.com	100	1	00	
10/19/2016	Eddie Adamos 3310 Mendocino Pl Oxnard CA 93033	☑IND □COM □OTH □PTY □SCC	retired	100	1	00	
10/20/2016	Alicia Flores 1051 W Kamala St Oxnard CA 93033	IND COM OTH PTY SCC	Executive Director La Hermandad	100	1	00	
10/20/2016	John Bock 4434 Melisa Wy San Diego CA 92117	IND COM OTH PTY	self-employed photographer	250	2	50	
			SUBTOTAL	\$ 650			

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PTY - Political Party

Amounts may be rounded to whole dollars

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole d	ollars.	Statement co	CALIFORNIA 460				
				from Sep 2	FORM 4		400		
				through Oct	22 2016	016 Page 8 of			
IAME OF FILER		***************************************	<u></u>		······································	I.D. NUI	MBER		
Tim Flynn fo	or Mayor 2016					13111	91	OVER CHARACTER	
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO	R CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT RECEIVED THIS	CUMULATIVE			LECTION DATE	

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)			
10/21/2016	William J Clark 2250 Monaco Dr Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	dentist Cole & Clark Oral Surgery	100	100				
10/21/2016	Sean Henggeler 2151 Paseo Isla Oxnard CA 93030	IND COM OTH PTY	co-owner Dominicks Italian Restaurant	200	200				
10/21/2016	Ray C Tafoya 234 Ashton St Oxnard CA 93033	☑IND □COM □OTH □PTY □SCC	Information Systems Specialist U S Dept of Defense	100	170				
10/21/2016	Glenn Harris P O Box 1933 Camarillo CA 93010	ZIND COM OTH PTY	president SoCalGold	100	100				
10/21/2016	Barbara A Wilk 1560 Twin Tides Pl Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	self-employed entrepreneur	100	200				
	SUBTOTAL\$ 600								

*Contributor Codes

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PTY - Political Party

Amounts may be rounded to whole dollars

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole o	Iollars.	Statement covers period			FORNIA	120
_				from Sep 2	5 2016	FC	DRM	460
				throughOct 2	22 2016	Page _	9 of	17
NAME OF FILER						I.D. NU	MBER	
Tim Flynn f	or Mayor 2016					13111	91	
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO	OR CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT PECEIVED THIS	CUMULATIVE T			ECTION

						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)		
10/21/2016	Central Coast Electric Boat Company 2950 Harbor Bl Oxnard CA 93035	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		100	100			
10/21/2016	Robert & Brigette Chasmar 5007 Sealane Wy Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	owners Chaz Distributing	100	100			
10/21/2016	Dina Lambert 4939 Ponderosa Wy Midpines CA 94525	☑IND □COM □OTH □PTY □SCC	Information Technology Mgr. Tavis Corporation	100	100			
10/21/2016	Cynthia Maurer 5145 Whitecap St Oxnard CA 93035	☑IND ☐COM ☐OTH ☐PTY ☐SCC	physical therapist San BuenaVentura Physical Therapy	200	200			
10/21/2016	David & Nancy Laufer 5147 Corbina Wy Oxnard CA 93035	IND COM OTH PTY	self-employed Laufer Insurance Services	300	400			
	SUBTOTAL\$ 800							

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Schedule A (Continuation Sheet)

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement covers period from Sep 25 2016	california 460
		through Oct 22 2016	Page 10 of 17
NAME OF FILER			I.D. NUMBER
Tim Flynn for Mayor 2016			1311191

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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)
10/21/2016	Angela Slaff 5131 Wavecrest Wy Oxnard CA 93035	☑IND □ COM □ OTH □ PTY □ SCC	retired	50	150	
10/21/2016	David G Brooks 5047 Corbina Wy Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	self-employed architect	150	250	
10/21/2016	Lauraine Effress 2831 Harbor Bl Oxnard CA 93035	☑IND □COM □OTH □PTY □SCC	retired	50	200	
10/21/2016	M Eugene & Linda Fussell 660 Fernwood Dr Oxnard CA 93035	IND COM OTH PTY	retired	100	100	
10/21/2016	Joseph Contaoi 2664 Honeysuckle Dr Oxnard CA 93036	☑IND □COM □OTH □PTY □SCC	retired	120	120	
			SUBTOTAL	\$ 470		

*Contributor Codes

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from Sep 25 2016	california 460				
through Oct 22 2016	Page11 of17				
	I.D. NUMBER				
	11211101				

Tim Flynn fo	or Mayor 2016				13111	191
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)
10/21/2016	Deborah Linehan 2601 Lilac Dr Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	retired	100	100	
10/21/2016	Edward E Escobedo 21525 Yucatan Av Woodland Hills CA 91364	IND COM OTH PTY	retired	100	100	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
water and the second se			SUBTOTAL	\$ 200		

*Contributor Codes

IND - Individual

NAME OF FILER

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Schedul Nonmor	e C netary Contributions Received		Amounts may be rounded to whole dollars.		s	itatement covers p		CALIFO	
					from	Sep 25 20		FOR	12 of 17
SEE INSTRUCT NAME OF FILER	TIONS ON REVERSE							I.D. NUMB	
Tim Flynr	n for Mayor 2016							131119	
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 SERV		AMOUNT/ FAIR MARKET VALUE	CALENDA	TIVE TO TE AR YEAR DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/2410/22	Fred and Gail Rosenmund 2816 Rice Rd Oxnard CA 93030	☑IND □COM □OTH □PTY □SCC	attorney Rosenmund Baio & Morrow	sign services rendered for s rage,construc & installation	sto-	2000		4500	
9/20/16	Tandem Brewery LLC 1009 Harbor Blvd Oxnarfd CA 93035	□IND □COM ☑OTH □PTY □SCC		beer tasting a service personnel for fundraiser		1400		2155	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
Attach add	ditional information on appropriately labeled	d continuation	sheets.	SUBT	OTAL	\$ 3400			

Schedule C Summary

Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	.\$ 3400
2. Amount received this period – unitemized nonmonetary contributions of less than \$100	
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.)TOTAL	\$3400

*Contributor Codes

IND - Individual

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

PTY - Political Party

Schedule E Payments Made	Amounts may be rounded to whole dollars.			Staten	nent covers period Sep 25 2016	CALIFO FOR	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Tim Flynn for Mayor 2016				through _	Oct 22 2016	Page1	
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees FND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and si POS postage, deli	nmunications d appearances ses lating urvey research	er services	RAD radio RFD retur SAL camp TEL t.v. o TRC cand TRS staff, TSF trans VOT votes	ribe the payment. a airtime and production ned contributions realing workers' salaries r cable airtime and prod idate travel, lodging, an spouse travel, lodging, if fer between committees r registration mation technology costs	luction costs d meals and meals s of the same	•
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESC	RIPTION OF F	PAYMENT		AMOUNT PAID
Costco 2001 Ventura Bl Oxnard CA 93036		FND					160.12
BGs Cafe 428 S A St Oxnard CA 93030		MTG					164.59
Home Depot 401 W Esplanade Dr Oxnard CA 93036		СМР					337.76
* Payments that are contributions or independent expenditures must also be	e summarized on Scho	edule D.			SL	JBTOTAL \$	662.47
Schedule E Summary 1. Itemized payments made this period. (Include all Schedule 2. Unitemized payments made this period of under \$100						\$ <u></u>	9529.74 547.98

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....\$ ___

10077.72

Schedule		
(Continua	tion	Sheet)
Payments	Mac	le

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA / CO
from Sep 25 2016	FORM 46U
through Oct 22 2016	Page 14 of 17
 - Control of the Cont	I.D. NUMBER
	1311191

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Tim Flynn for Mayor 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. campaign consultants MTG meetings and appearances RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PHO phone banks TRC candidate travel, lodging, and meals candidate filing/ballot fees FND fundraising events TRS staff/spouse travel, lodging, and meals POL polling and survey research postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* professional services (legal, accounting) LEG legal defense VOT voter registration WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) **US Post Office** POS Oxnard Main 423.00 1961 N C St Oxnard CA 93036 B & B Services 2401 Eastman Av Ste 25 LIT 3945.11 Oxnard CA 93030 Richard Santillan volunteers meals, gasoline, misc. expenses 3341 Paula St 600.00 Oxnard CA 93033 COGS South Sign signs 3309 S Main St Santa Ana CA 92707 3033,00 **NationBuilder** 520 S Grand Av Los Angeles CA 90071 WEB 136.00

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

8137.11

SUBTOTAL \$

Schedule		
(Continua	tion	Sheet)
Payments	Mad	de

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

CNS campaign consultants

Amounts may be rounded to whole dollars.

MBR member communications

OFC office expenses

MTG meetings and appearances

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

Statement covers period	CALIFORNIA / CO
from Sep 25 2016	FORM 400
through Oct 22 2016	Page 15 of 17
	I.D. NUMBER

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Tim Flynn for Mayor 2016 1311191

* Payments that are contributions or independent expenditures must also be summarize	ed on Schedule D.		SUBT	OTAL \$ 730.16
Fausset Printing 1799 Eastman Av Ventura CA 93003	LIT			451.50
Alpine Market 833 W Torrance Bl Torrance CA 90502	FND			278.66
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FIL candidate filing/ballot fees PHO pho FND fundraising events POL poll ND independent expenditure supporting/opposing others (explain)* POS pos	ling and survey resea stage, delivery and mo ressional services (le	essenger services	TEL t.v. or cable airtime and production TRC candidate travel, lodging, and merors staff/spouse travel, lodging, and not transfer between committees of the VOT voter registration WEB information technology costs (interested in the voter registration).	als neals ne same candidate/sponsor

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement cove	ers period	CALIFO	RNIA	А	A	$\widehat{\Lambda}$
from Sep 25	2016	FOR	Vi			•
through Oct 2	22 2016	Page1	6	of_	17	

I.D. NUMBER

1311191

SEE INSTRUCTIONS ON REVERSE

NAME OF EILER

Tim Flynn for Mayor 2016

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

MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. RFD returned contributions CNS campaign consultants MTG meetings and appearances OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)*

PET petition circulating TEL t.v. or cable airtime and production costs CVC civic donations

TRC candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events

independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor legal defense PRO professional services (legal, accounting) VOT voter registration LEG

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
Fausset Printing 1799 Eastman Av Ventura CA 93003	LIT	0	1288.00	0	1288.00
Tandem Brewery LLC 1009 Harbor Bl Oxnard CA 93035	Beer and service for fundraisers	0	300	0	300
Timothy B Flynn 211 N F St Oxnard CA 93030	wood and screws for signs	545.39	0	0	545.39
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 545.39	\$ 1588.00 ^{\$}	§ 0	\$ 2133.39

Schedule F Summary

١.	Total accrued expenses incurred this p	eriod. (Include all Schedule	F, Column (b) subtotal	is for		4 = 4
	accrued expenses of \$100 or more, plu	us total unitemized accrued	expenses under \$100.	.)INCURRE	D TOTALS \$	1588

- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on 3033
- 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 \$ <1445>

 May be a negative number

Schedule			
(Continua	ation Shee	et)	
Accrued	Expenses	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statement covers period from Sep 25 2016	california 460			
through Oct 22 2016	Page 17 of 17			
	I.D. NUMBER			
	1311191			

NAME OF FILER

Tim Flynn for 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. MBR member communications 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 PHO phone banks

FIL candidate filing/ballot fees FND fundraising events

independent expenditure supporting/opposing others (explain)*

LEG legal defense

campaign literature and mailings

polling and survey research

POS postage, delivery and messenger services PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

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)

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(2) 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
COGS South Signs 3309 S Main St Santa Ana CA 92707	outdoor advertising	3033.00	0	3033.00	0
	SUBTOTALS	\$ 3033.00	\$ 0	\$ 3033.00	\$ 0