

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Louis Edward Masry		AREA CODE/PHONE NUMBER 818-851-9939		I.D. NUMBER (if applicable)		Date of This Filing 11-1-2016		Date Stamp 11/1/16 Rec'd via email via Oxnard City Clark		CALIFORNIA FORM 496 For Official Use Only	
STREET ADDRESS 951 S. Westlake Blvd, Suite 204						STATE CA		ZIP CODE 91361		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY Westlake Village						STATE CA		ZIP CODE 91361		No. of Pages 1	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPOSED			
Oscar Madrigal							
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPOSE
City Council, City of Oxnard		X					

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
11-1-2016	DMH Meyer Inc.-Campaign Mailer	\$3,443.29

Reason for Amendment: _____