### 1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
- Recall (Also Complete Part 6)
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
- Controlled (Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee (Also Complete Part 7)
- Semi-annual Statement
- Termination Statement (Also file a Form 410 Termination)

### 2. Type of Statement:

- Preelection Statement
- Quarterly Statement
- Special Odd-Year Report

### 3. Committee Information

- **I.D. NUMBER**: 1389129
- **COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)**: Committee to Elect Sylvia Paniagua Oxnard City Clerk 2016
- **STREET ADDRESS (NO P.O. BOX)**: 1901 Spyglass Trail West, Oxnard, CA 93036
- **MAILING ADDRESS**: 1950 St. Andrews Court

### 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.

**Executed on**: 01/30/2017

**By**: [Signature]

**Date**: [Signature of Treasurer or Assistant Treasurer]

**Executed on**: 01/30/2017

**By**: [Signature of Controlling Officer/Sponsor]

**Date**: [Signature of Controlling Officer, Candidate, State Measure Proponent or Responsible Officer of Sponsor]

**Executed on**: [Signature of Controlling Officer, Candidate, State Measure Proponent]

**Date**: [Signature of Controlling Officer, Candidate, State Measure Proponent]

**FPPC Form 460 (Jan/2016)**

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

www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Sylvia Paniagua

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Oxnard City Clerk

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

1901 Spyglass Trail West Oxnard CA 93036

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. PO. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

IDENTIFY THE CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROponent, IF ANY.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROponent

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

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

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NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

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

Attach continuation sheets if necessary

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

<table>
<thead>
<tr>
<th>Item</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$196</td>
<td>$7490</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$196</td>
<td>$7490</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$250</td>
<td>$250</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$446</td>
<td>$7740</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th>Item</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$1238</td>
<td>$6448</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$1238</td>
<td>$6448</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$250</td>
<td>$250</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$1488</td>
<td>$6698</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

12. Beginning Cash Balance ........................................... $1042
13. Cash Receipts ................................................................ $196
14. Miscellaneous Increases to Cash ................................... $1236
15. ENDING CASH BALANCE ................................................ $0

*If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED .......................................... $0

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..................................................... $0
19. Outstanding Debts .................................................... $0

---

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

<table>
<thead>
<tr>
<th>Item</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions Received</td>
<td>$196</td>
<td>$7490</td>
</tr>
<tr>
<td>Expenditures Made</td>
<td>$1238</td>
<td>$6448</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$1488</td>
<td>$6698</td>
</tr>
</tbody>
</table>

**Expenditure Limit Summary for State Candidates**

22. Cumulative Expenditures Made*

<table>
<thead>
<tr>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>mm/dd/yy</td>
<td>$</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.
### Schedule A
### Monetary Contributions Received

#### Statement covers period
- **from**: 10/23/2016
- **through**: 01/31/2017

#### NAME OF FILER
Committee to Elect Sylvia Paniagua Oxnard City Clerk 2016

#### I.D. NUMBER
1389129

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</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>11/4/16</td>
<td>Carmen Chavira</td>
<td>□ IND  □ COM  □ OTH □ PTY □ SCC</td>
<td>Retired</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ IND  □ COM  □ OTH □ PTY □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ IND  □ COM  □ OTH □ PTY □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ IND  □ COM  □ OTH □ PTY □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ IND  □ COM  □ OTH □ PTY □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $**: 100

#### Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ................................................................. $ 100
2. Amount received this period – unitemized monetary contributions of less than $100 ........................................ $ 96
3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ................. TOTAL $ 196

*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

FPCC Form 460 (Jan/2016)
FPCC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
# Schedule C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>CALIFORNIA FORM 460</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 10/23/2016</td>
<td>460</td>
</tr>
<tr>
<td>through 01/31/2017</td>
<td></td>
</tr>
<tr>
<td>I.D. NUMBER</td>
<td>1389129</td>
</tr>
<tr>
<td>NAME OF FILER</td>
<td></td>
</tr>
</tbody>
</table>

**DATE RECEIVED** | **FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR** | **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 DATE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)** | **PER ELECTION TO DATE (IF REQUIRED)** |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11/8/2016</td>
<td>Karla Michaels 2540 Peninsula Road Oxnard, CA 93035</td>
<td>☑ IND</td>
<td>Retired</td>
<td>Election Night Food</td>
<td>250.00</td>
<td>250.00</td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL $** 250

## Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.) .......................................................... $ 250

2. Amount received this period – unitemized nonmonetary contributions of less than $100 .................................................. $ 0

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 $ 250

*Contributor Codes
IND - Individual
COM - Recipient Committee
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
## Schedule E Payments Made

Amounts may be rounded to whole dollars.

**Statement covers period**
from __________ 10/23/2016
through __________ 01/31/2017

**CALIFORNIA FORM**

**SCHEDULE E**

**I.D. NUMBER**
1389129

### 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)

### Payments Made

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monique Garcia</td>
<td>FND</td>
<td>Bingo Fundraiser, t-shirts</td>
<td>300</td>
</tr>
<tr>
<td>3370 Moss Landing Boulevard</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxnard 93036</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Suzanne Becerra</td>
<td>FND</td>
<td>Fundraiser prizes (bingo)</td>
<td>150</td>
</tr>
<tr>
<td>1950 St. Andrews Court</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxnard 93036</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frank Aguirre</td>
<td>CMP</td>
<td>Stakes, Forms, etc for signs</td>
<td>169</td>
</tr>
<tr>
<td>1901 Spyglass Trail West</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.

**SUBTOTAL $** 619

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $ 1204
2. Unitemized payments made this period of under $100. $ 34
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) $ 1238

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

**Payments Made**

**NAME OF FILER**
Committee to Elect Sylvia Paniagua Oxnard City Clerk 2016

**I.D. NUMBER**
1389129

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

- **CMP** campaign paraphernalia/misc.
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- **LEG** legal defense
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- **TSF** transfer between committees of the same candidate/sponsor
- **VOT** voter registration
- **WEB** information technology costs (internet, e-mail)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beyond Gravity Media</td>
<td>WEB</td>
<td>Social Media Management</td>
<td>585</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $**
585