**497 Contribution Report**

**NAME OF FILER**
DR. MIGUEL LOPEZ FOR MAYOR 2018

**AREA CODE/PHONE NUMBER**
(805) 889-8169

**I.D. NUMBER**
1402185

**STREET ADDRESS**
2541 Tafarris Ln.

**CITY**
Oxnard

**STATE**
CA

**ZIP CODE**
93035

**Date of This Filing**
3/7/18

**Report No.**
2018R-C

**CALIFORNIA FORM 497**

**Oxnard City Clerk**
2018 MAR - 7 PM 12:47

**For Official Use Only**

**1. Contribution(s) Received**

<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</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/6/2018</td>
<td>Laborers Int. Union of North America Local No.. 585, AFL-CIO PACC ACCOUNT All Purpose Account 21 South Dos Caminos Avenue Ventura, CA 93003</td>
<td>□ IND ✔ COM □ OTH □PTY □ SCC</td>
<td></td>
<td>$2,500.00</td>
</tr>
</tbody>
</table>

**Provide interest rate**

**□ Check if Loan**

**Provide interest rate**

**□ Check if Loan**

**□ Check if Loan**

**□ Check if Loan**

**** Contributor Codes**

- IND — Individual
- COM — Recipient Committee (other than PTY or SCC)
- OTH — Other (eg., business entity)
- PTY — Political Party
- SCC — Small Contributor Committee

**Reason for Amendment:**

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