**497 Contribution Report**

**NAME OF FILER**

DR. MIGUEL LOPEZ FOR MAYOR 2018

**AREA CODE/PHONE NUMBER**

(805) 889-8169

**I.D. NUMBER (if applicable)**

1402185

**STREET ADDRESS**

2541 Taffrail Ln.

**CITY**

Oxnard

**STATE**

CA

**ZIP CODE**

93035

**Date of This Filing**

5/3/18

**Report No.**

2018R-K

**Date Stamp**

Oxnard City

2018 MAY 3 PM

5: 27

**CALIFORNIA FORM**

497

For Official Use Only

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**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>5/3/2018</td>
<td>FIREFIGHTERS FOR BETTER GOVERNMENT 3251 Corte Malpaso, Ste. 501C Camarillo, CA 93012</td>
<td>□ IND</td>
<td>☑ COM</td>
<td>$2,000.00</td>
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<td></td>
<td></td>
<td>□ OTH</td>
<td>☑ Provide interest rate</td>
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<td>□ PTY</td>
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<td>□ Check if Loan</td>
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<td>Provide interest rate</td>
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</tbody>
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**Reason for Amendment:**

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**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

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FPPC Form 497 (Jul/2016)

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

www.fppc.ca.gov