STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
2018 AUG - 8 PM 2: 06

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
City of Oxnard
Division, Board, Department, District, if applicable
City Council District 5
Your Position
Candidate for City Council

⇒ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)
Agency: ____________________________ Position: ____________________________

2. Jurisdiction of Office (Check at least one box)
☐ State
☐ Multi-County ____________________________ ☐ Judge or Court Commissioner (Statewide Jurisdiction)
☒ City of Oxnard ____________________________ ☐ County of ____________________________
☐ Other ____________________________

3. Type of Statement (Check at least one box)
☐ Annual: The period covered is January 1, 2017, through
December 31, 2017.

⇒ The period covered is ______________ through
December 31, 2017.

☐ Assuming Office: Date assumed ______________

☐ Candidate: Date of Election ____________________________ and office sought, if different than Part 1:
Nov 6, 2018

☐ Leaving Office: Date Left ______________/

(Enter)

☐ The period covered is January 1, 2017, through the date of

leaving office.

⇒ The period covered is ______________ through

the date of leaving office.

☐ (Check one)

☐ None - No reportable interests on any schedule

4. Schedule Summary (must complete) ⇒ Total number of pages including this cover page: 1
Schedules attached
☐ Schedule A-1 - Investments - schedule attached
☐ Schedule A-2 - Investments - schedule attached
☐ Schedule B - Real Property - schedule attached
☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule D - Income - Gifts - schedule attached
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
3700 Dallas Drive Oxnard CA 93033
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
( 805 ) 443-1268 gbasuag@yahoo.com
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed August 8, 2018 Signature
(month, day, year)