497 Contribution Report

NAME OF FILER
Cryder For Oxnard City Council 2018

AREA CODE/PHONE NUMBER
805-984-1248

ID NUMBER (if applicable)
1403949

STREET ADDRESS
3015 Naples Dr.

CITY
Oxnard

STATE
CA

ZIP CODE
93035

Date of This Filing: 8/23/2018

Report No.: 2

Amendment to Report No. (explain below):

Nb. of Pages: 1

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(s)</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED</th>
<th>CHECK IF LOAN</th>
<th>PROVIDE INTEREST RATE</th>
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