Officeholder and Candidate
Campaign Statement - Short Form

Date of election if applicable: Nov. 6, 2018
☑ Amendment (Explain Below)

1. Statement Covers Calendar Year 20... 18

2. Officeholder or Candidate Information
NAME OF OFFICEEHOLDER OR CANDIDATE
Luis Garcia-Morilla

STREET ADDRESS
320 W Bard Rd, Oxnard, CA, 93033

CITY
Oxnard

STATE
CA

ZIP CODE
93033

AREA CODE/DAYTIME PHONE NUMBER
213-453-0868

OPTIONAL: FAX/EMAIL ADDRESS
LuisForOxnard@juno.com

3. Office Sought or Held
OFFICE SOUGHT OR HELD
City Council Member, District 6

JURISDICTION (LOCATION)
Oxnard, CA

DISTRICT NUMBER (IF APPLICABLE)
6

4. Committee Information
List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

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<th>COMMITTEE NAME AND I.D. NUMBER</th>
<th>COMMITTEE ADDRESS</th>
<th>NAME OF TREASURER</th>
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5. Verification
I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than $2,000 and that I will spend less than $2,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 8/7/2018

By

Signature of Officeholder or Candidate

FPFC Form 470/470 Supplement (Jan/2016)
FPCC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov