

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

Received
COVER PAGEard City Clerk

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Perello Bert Eugene

2018 AUG -8 AM 11:19

1. Office, Agency, or Court

Agency Name (Do not use acronyms)
City of Oxnard
Division, Board, Department, District, if applicable
City Council
Your Position
City Councilmember, District 1

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
City of Oxnard
Judge or Court Commissioner (Statewide Jurisdiction)
County of
Other

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2017, through December 31, 2017.
Leaving Office: Date Left
Assuming Office: Date assumed
Candidate: Date of Election 11/6/18 and office sought, if different than Part 1:

4. Schedule Summary (must complete) Total number of pages including this cover page: 3

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
None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE
2391 Redwing Lane Oxnard CA 93036
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
(805) 240-6194 perellobert@gmail.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 Bert E. Perello

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Name
Bert Eugene Perello

NAME OF BUSINESS ENTITY: Western International Securities
GENERAL DESCRIPTION OF THIS BUSINESS: Investment Company
FAIR MARKET VALUE: [X] \$100,001 - \$1,000,000
NATURE OF INVESTMENT: [X] Stock
IF APPLICABLE, LIST DATE: / / 17 ACQUIRED / / 17 DISPOSED

NAME OF BUSINESS ENTITY: Western International Securities
GENERAL DESCRIPTION OF THIS BUSINESS: Investment Company
FAIR MARKET VALUE: [X] \$100,001 - \$1,000,000
NATURE OF INVESTMENT: [X] Other Individual Retirement Acct.
IF APPLICABLE, LIST DATE: / / 17 ACQUIRED / / 17 DISPOSED

NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE
NATURE OF INVESTMENT
IF APPLICABLE, LIST DATE: / / 17 ACQUIRED / / 17 DISPOSED

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GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE
NATURE OF INVESTMENT
IF APPLICABLE, LIST DATE: / / 17 ACQUIRED / / 17 DISPOSED

Comments:

SCHEDULE D
Income – Gifts

Name
 Bert Eugene Perello

▶ NAME OF SOURCE *(Not an Acronym)*
 Chuck Bauman

ADDRESS *(Business Address Acceptable)*
 542 Harvard Court, Kingman, AZ 86409

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Retired

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| 1 / 13 / 18 | \$ 90 | Two Concert Tickets |
| / / | \$ | |
| / / | \$ | |

▶ NAME OF SOURCE *(Not an Acronym)*
 Melody Rich

ADDRESS *(Business Address Acceptable)*
 1663 7th Street, Port Hueneme, CA 93041

BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Defense Contractor

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|---------|------------------------|
| 5 / 6 / 18 | \$ 125. | Airplane Ride |
| / / | \$ | |
| / / | \$ | |

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

▶ NAME OF SOURCE *(Not an Acronym)*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
| / / | \$ | |
| / / | \$ | |
| / / | \$ | |

Comments: _____