STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

NAME OF FILER (LAST) (FIRST) White Elizabeth

1. Office, Agency, or Court
Agency Name (Do not use acronyms)
City of Oxnard Candidate for City Council Member
Division, Board, Department, District, if applicable Your Position
District 5
➤ 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)
☐ Leaving Office: Date Left __/__/2017
- or -
☐ The period covered is __/__/2017, through December 31, 2017.
☐ Other __________________________
☐ The period covered is __/__/2017, through the date of leaving office.

☒ Candidate: Date of Election Nov 06, 2018 and office sought, if different than Part 1: __________________________

4. Schedule Summary (must complete) ➤ Total number of pages including this cover page: __
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
- or -
☒ None - No reportable interests on any schedule

5. Verification
MAILING ADDRESS STREET CITY STATE ZIP CODE
5280 Cypress Road Oxnard CA 93033
(Business or Agency Address Recommended - Public Document)
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS
( 805 ) 607-9603 elizabethwhite805@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 11/3, 2018  Signature __________________________
(month, day, year) (File the originally signed statement with your filing official)