Recipent Committee
Campaign Statement
Cover Page

Statement covers period
from 07/01/2018
through 09/22/2018

Date of election (if applicable): 11/06/2018

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   - Officeholder, Candidate Controlled Committee
   - State Candidate Election Committee
   - Recall (Also Complete Part 6)
   - General Purpose Committee
   - Sponsored
   - Small Contributor Committee
   - Political Party/Central Committee
   - Primarily Formed Ballot Measure Committee
   - Controlled
   - Sponsored (Also Complete Part 6)
   - Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:
   - Preelection Statement
   - Semi-annual Statement
   - Termination Statement (Also file a Form 410 Termination)
   - Amendment (Explain below)
   - Changes to Schedule A and B

3. Committee Information
   - I.D. Number: 1409205
   - Committee Name (or Candidate's Name if No Committee): VIANEY LOPEZ FOR OXNARD CITY COUNCIL 2018
   - Street Address (No P.O. Box): 3004 JACKSON STREET
   - City: OXNARD
   - State: CA
   - Zip Code: 93033
   - Area Code/Phone: (805) 204-7500
   - Mailing Address (if different) No. and Street or P.O. Box:
   - City:
   - State:
   - Zip Code:
   - Area Code/Phone:
   - Optional: Fax/E-mail Address:

Treasurer(s)
   - Name of Treasurer: PATRICIA QUIROZ
   - Mailing Address: 1104 NORTH 6TH STREET
   - City: PORT HUENEME
   - State: CA
   - Zip Code: 93041
   - Area Code/Phone: (805) 889-6711
   - Name of Assistant Treasurer, if Any: VIANEY LOPEZ
   - Mailing Address: 3004 JACKSON STREET
   - City: OXNARD
   - State: CA
   - Zip Code: 93033
   - Area Code/Phone: (805) 204-7500
   - Optional: Fax/E-mail Address:

4. Verification
   I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

   Executed on 9/27/2018
   By [Signature of Treasurer or Assistant Treasurer]

   Executed on 09/27/2018
   By [Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor]

   Executed on
   By

   Executed on
   By

   Executed on
   By

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICER/Holder OR CANDIDATE

Vaney Lopez

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Oxnard City Councilmember, District 6

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

3004 Jackson St. Oxnard CA 93033

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?

YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

SUPPORT OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICER/HOLDER, CANDIDATE, OR PROponent

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICER/HOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT OPPOSE

NAME OF OFFICER/HOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT OPPOSE

NAME OF OFFICER/HOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT OPPOSE

NAME OF OFFICER/HOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT OPPOSE

CITY STATE ZIP CODE AREA CODE/PHONE

Attach continuation sheets if necessary
**Contributions Received**

<table>
<thead>
<tr>
<th>1. Monetary Contributions</th>
<th>Schedule A, Line 3</th>
<th>$429.00</th>
<th>$429.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Loans Received</td>
<td>Schedule B, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>$529.00</td>
<td>$529.00</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>145.33</td>
<td>145.33</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>$5374.33</td>
<td>$5374.33</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th>6. Payments Made</th>
<th>Schedule E, Line 4</th>
<th>$209.93</th>
<th>$209.93</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Loans Made</td>
<td>Schedule H, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>$209.93</td>
<td>$209.93</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
<td>145.33</td>
<td>145.33</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>$355.26</td>
<td>$355.26</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

| 12. Beginning Cash Balance | Previous Summary Page, Line 18 | $0 | $0 |
| 13. Cash Receipts | Column A, Line 3 above | $529.00 | $529.00 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | 0 | 0 |
| 15. Cash Payments | Column A, Line 8 above | $209.93 | $209.93 |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | $5019.07 | $5019.07 |

If this is a termination statement, Line 16 must be zero.

**Cash Equivalents and Outstanding Debts**

| 18. Cash Equivalents | See instructions on reverse | $0 | $0 |
| 19. Outstanding Debts | Add Line 2 + Line 9 in Column B above | $800 | $800 |

*Amounts in this section may be different from amounts reported in Column B.*

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### Schedule A
Monetary Contributions Received

**FPPC Form 460 (Jan/2016)**
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

#### Statement covers period
from 07/01/2018 through 09/22/2018

**NAME OF FILER**
Vianey Lopez for Oxnard City Council 2018

**I.D. NUMBER**
1409205

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/29/18</td>
<td>Murray Rosenbluth 2591 Northstar Cove Port Hueneme, CA 93041</td>
<td>☑ IND</td>
<td>Retired</td>
<td>$500.00</td>
<td>$500.00</td>
<td></td>
</tr>
<tr>
<td>8/30/18</td>
<td>Carina Armenta 1609 E. Jefferson Way, #209 Simi Valley, CA 93065</td>
<td>☑ IND</td>
<td>District Director, U.S. House of Representatives</td>
<td>$150.00</td>
<td>$150.00</td>
<td></td>
</tr>
<tr>
<td>8/30/18</td>
<td>Mollie Culver 315 Miegs Rd., #A427 Santa Barbara, CA 93109</td>
<td>☑ IND</td>
<td>Self Employed, Culver and Associates</td>
<td>$300.00</td>
<td>$300.00</td>
<td></td>
</tr>
<tr>
<td>9/3/18</td>
<td>Trevor Zierhut 550 Forest Park Blvd., Apt 320B Oxnard, CA 93036</td>
<td>☑ IND</td>
<td>Self Employed, Zierhut Consulting</td>
<td>$500.00</td>
<td>$500.00</td>
<td></td>
</tr>
<tr>
<td>9/7/18</td>
<td>Carlos Lopez PO Box 882 Simi Valley, CA 93062</td>
<td>☑ IND</td>
<td>Construction, General Construction</td>
<td>$100.00</td>
<td>$100.00</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $** $1550.00

#### Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .......................................................... $ 4025.00

2. Amount received this period – unitemized monetary contributions of less than $100 ................ $ 404.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ............... TOTAL $ 4429.00

---

*Contributor Codes
IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee*
**Schedule A (Continuation Sheet)\nMonetary Contributions Received**

Amounts may be rounded to whole dollars.

<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</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/8/18</td>
<td>Ramon Flores 1937 Lago Ln. Oxnard, CA 93036</td>
<td>IND</td>
<td>Engineer, U.S. Navy</td>
<td>$200.00</td>
<td>$200.00</td>
<td></td>
</tr>
<tr>
<td>9/8/18</td>
<td>Yolanda Mejia 244 McNab Court Fillmore, CA 93015</td>
<td>IND</td>
<td>School Psychologist, Santa Barbara Unified School District</td>
<td>$100.00</td>
<td>$100.00</td>
<td></td>
</tr>
<tr>
<td>9/8/2018</td>
<td>Jo Ann Olivares 2304 Mint Way Oxnard, CA 93036</td>
<td>IND</td>
<td>Retired</td>
<td>$100.00</td>
<td>$100.00</td>
<td></td>
</tr>
<tr>
<td>9/9/18</td>
<td>Democratic Club of Ventura, FPPC: 1267335 1787 Tribute Rd., Suite K Sacramento, CA 95815</td>
<td>IND COM</td>
<td></td>
<td>$325.00</td>
<td>$325.00</td>
<td></td>
</tr>
<tr>
<td>9/11/18</td>
<td>Limon for Assembly 2018, FPPC: 1392511 1787 Tribute Rd., Suite K Sacramento, CA 95815</td>
<td>IND COM</td>
<td></td>
<td>$500.00</td>
<td>$500.00</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $** $1225.00

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*Contributor Codes*

- IND – Individual
- COM – Recipient Committee (other than PTY or SCC)
- OTH – Other (e.g., business entity)
- PTY – Political Party
- SCC – Small Contributor Committee

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FPPC Form 460 (Jan/2016)
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www.fppc.ca.gov
Schedule A (Continuation Sheet)  
Monetary Contributions Received

Amounts may be rounded to whole dollars.

<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 *</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative to Date Calendar Year (Jan. 1 - Dec. 31)</th>
<th>Per Election to Date (If Required)</th>
</tr>
</thead>
</table>
| 9/20/18       | Ventura County Women's Political Council  
PO Box 6603 - FPPC: 1338290  
Ventura, CA 93006 | [ ] IND  
[ ] COM  
[ ] OTH  
[ ] PTY  
[ ] SCC | $1000.00 | $1000.00 | |
| 9/21/18       | Mark Lisagor  
477 Calle Higuera  
Camarillo, CA 93010 | [ ] IND  
[ ] COM  
[ ] OTH  
[ ] PTY  
[ ] SCC | Trustee,  
Ventura County Board of Education | $250.00 | $250.00 | |

Subtotal $2,250.00

*Contributor Codes

IND = Individual  
COM = Recipient Committee  
(Other than PTY or SCC)  
OTH = Other (e.g., business entity)  
PTY = Political Party  
SCC = Small Contributor Committee
Schedule C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from 07/01/2018 through 09/22/2018

Vianey Lopez for Oxnard City Council 2018

<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 *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>DESCRIPTION OF GOODS OR SERVICES</th>
<th>AMOUNT/FAIR MARKET VALUE</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/13/2018</td>
<td>Eva E. Lopez 2541 Taffrail Ln. Oxnard, CA 93035</td>
<td>✓ IND</td>
<td>Retired</td>
<td>Literature</td>
<td>$145.33</td>
<td>$145.33</td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ 145.33

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.) .................................................. $ 145.33

2. Amount received this period – unitemized nonmonetary contributions of less than $100 ............... $ 0

3. Total nonmonetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .................................. TOTAL $ 145.33
Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 07/01/2018
through 09/22/2018

Vianey Lopez for Oxnard City Council 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMP</td>
<td>campaign paraphernalia/misc.</td>
<td>MBR</td>
<td>member communications</td>
</tr>
<tr>
<td>CNS</td>
<td>campaign consultants</td>
<td>MTG</td>
<td>meetings and appearances</td>
</tr>
<tr>
<td>CTB</td>
<td>contribution (explain nonmonetary)*</td>
<td>OFC</td>
<td>office expenses</td>
</tr>
<tr>
<td>CVC</td>
<td>civic donations</td>
<td>PET</td>
<td>petition circulating</td>
</tr>
<tr>
<td>FIL</td>
<td>candidate filing/ballot fees</td>
<td>PHO</td>
<td>phone banks</td>
</tr>
<tr>
<td>FND</td>
<td>fundraising events</td>
<td>POL</td>
<td>polling and survey research</td>
</tr>
<tr>
<td>IND</td>
<td>independent expenditure supporting/opposing others (explain)*</td>
<td>POS</td>
<td>postage, delivery and messenger services</td>
</tr>
<tr>
<td>LEG</td>
<td>legal defense</td>
<td>PRO</td>
<td>professional services (legal, accounting)</td>
</tr>
<tr>
<td>LIT</td>
<td>campaign literature and mailings</td>
<td>PRT</td>
<td>print ads</td>
</tr>
<tr>
<td>RAD</td>
<td>radio airtime and production costs</td>
<td>RFD</td>
<td>returned contributions</td>
</tr>
<tr>
<td>SAL</td>
<td>campaign workers' salaries</td>
<td>TEL</td>
<td>t.v. or cable airtime and production costs</td>
</tr>
<tr>
<td>TRC</td>
<td>candidate travel, lodging, and meals</td>
<td>TSF</td>
<td>transfer between committees of the same candidate/sponsor</td>
</tr>
<tr>
<td>VOT</td>
<td>voter registration</td>
<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE</th>
<th>OR</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
</table>

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL $209.93

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $209.93
2. Unitemized payments made this period of under $100. $0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) $209.93

FFPC Form 460 (Jan/2016)
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www.ffpc.ca.gov