1. **Type of Recipient Committee:**

- [x] Officeholder, Candidate Controlled Committee
- [ ] State Candidate Election Committee
- [ ] Recall
  
  (Also Complete Part 5)

- [ ] 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
  
  (Also Complete Part 7)

2. **Type of Statement:**

- [ ] Prelection Statement
- [ ] Semi-annual Statement
- [ ] Special Odd-Year Report
- [x] Termination Statement
  
  (Also file a Form 410 Termination)

- [ ] Amendment (Explain below)


Donation amount thru website was wrong including service fee


added to expenses.

3. **Committee Information**

<table>
<thead>
<tr>
<th>1.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1410534</td>
</tr>
</tbody>
</table>

**COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)**

Raiston For Oxnard City Council 2018

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

401 Geranium Place

**CITY**

Oxnard

**STATE**

CA

**ZIP CODE**

93036

**AREA CODE/PHONE**

805-218-9144

**MAILING ADDRESS**

401 Geranium Place

**CITY**

Oxnard

**STATE**

CA

**ZIP CODE**

93036

**AREA CODE/PHONE**

805-218-4916

**NAME OF TREASURER**

Lynn Raiston

**MAILING ADDRESS**

401 Geranium Place

**CITY**

Oxnard

**STATE**

CA

**ZIP CODE**

93036

**AREA CODE/PHONE**

805-218-4916

**NAME OF ASSISTANT TREASURER, IF ANY**

Lara Raiston

**MAILING ADDRESS**

401 Geranium Place

**CITY**

Oxnard

**STATE**

CA

**ZIP CODE**

93036

**AREA CODE/PHONE**

805-218-4916

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**

10-25-18

**Date**

**By**

Lynn A Raiston

**Signature of Treasurer or Assistant Treasurer**

**Executed on**

10-25-18

**Date**

**By**

signature of controlling officeholder, candidate, state measure proponent or responsible officer of sponsor

**Executed on**

**Date**

**By**

signature of controlling officeholder, candidate, state measure proponent

**Executed on**

**Date**

**By**

signature of controlling officeholder, candidate, state measure proponent
## Contributions Received

<table>
<thead>
<tr>
<th></th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>Schedule A, Line 3</td>
<td>$4200</td>
</tr>
<tr>
<td>2. LoansReceived</td>
<td>Schedule B, Line 3</td>
<td>$100</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>$4300</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>$0</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>$4300</td>
</tr>
</tbody>
</table>

## Expenditures Made

<table>
<thead>
<tr>
<th></th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>Schedule E, Line 4</td>
<td>$1594</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>Schedule H, Line 3</td>
<td>$0</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>$1594</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
<td>$800</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
<td>$0</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>$2394</td>
</tr>
</tbody>
</table>

## Current Cash Statement

<table>
<thead>
<tr>
<th></th>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Beginning Cash Balance</td>
<td>Previous Summary Page, Line 16</td>
</tr>
<tr>
<td>13. Cash Receipts</td>
<td>Column A, Line 3 above</td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>Schedule I, Line 4</td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>Column A, Line 8 above</td>
</tr>
<tr>
<td>16. ENDING CASH BALANCE</td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15</td>
</tr>
</tbody>
</table>

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

## Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th></th>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Cash Equivalents</td>
<td>See instructions on reverse</td>
</tr>
<tr>
<td>19. Outstanding Debts</td>
<td>Add Line 2 + Line 9 in Column B above</td>
</tr>
<tr>
<td>DATE RECEIVED</td>
<td>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</td>
</tr>
<tr>
<td>---------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>9/15/18</td>
<td>Ron &amp; Nancy Gradle 5675 Holly Ridge Dr. Camarillo, CA 93012-5524</td>
</tr>
<tr>
<td>9/17/18</td>
<td>Rob McCoy 4448 Camino Delarosa Thousand Oaks, CA 91320</td>
</tr>
</tbody>
</table>

**SUBTOTAL** $300.00

*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 E (Continuation Sheet)
### Payments Made

- **NAME OF FILER:** Ralston For Oxnard City Council 2018
- **I.D. NUMBER:** 1410534
- **Statement covers period:**
  - from: 7/1/18
  - through: 9/22/18

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

### Table of Payments Made

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE OR</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
</table>
| Smart & Final  
2021 N. Oxnard Blvd.  
Oxnard, CA 93036 | CMP     | Bags for Canvassers   | 35.99       |
| Helen Zufolo  
2400 E. Pleasant Valley Rd., #124  
Oxnard, CA 93033 | LIT     | Printing of Postcards | 200.00      |
| Bank Fee - Stripe | PRO     | Donate button on Website (Stripe) fee | 7.55 |

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

**SUBTOTAL:** $243.54

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