## Recipient Committee
### Campaign Statement
#### Cover Page

**Statement covers period:**
- **from:** 07/01/2018
- **through:** 12/31/2018

**Date of election if applicable:**
- **(Month, Day, Year):** 5/1/18

### 1. Type of Recipient Committee:
- **All Committees:** Complete Parts 1, 2, 3, and 4.
  - **☑** Officeholder, Candidate Controlled Committee
  - **☐** Primarily Formed Ballot Measure Committee
  - **☐** Termination Statement
    - **☑** Quarterly Statement
    - **☐** Special Odd-Year Report
  - **☑** Primarily Formed Candidate Committee
  - **☐** Sponsored
  - **☐** Small Contributor Committee

### 2. Type of Statement:
- **☐** Pre-election Statement
- **☑** Semi-annual Statement
- **☑** Termination Statement
  - **☐** Amendment (Explain below)

### 3. Committee Information

<table>
<thead>
<tr>
<th>COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>MIGUEL LOPEZ FOR MAYOR 2018</td>
<td>1402185</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STREET ADDRESS (NO P.O. BOX)</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2541 Taftail Ln.</td>
<td>Oxnard</td>
<td>CA</td>
<td>93035</td>
<td>(805)889-8169</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MAILING ADDRESS (IF DIFFERENT)</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>OPTIONAL: FAX / E-MAIL ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
</table>

### 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.

**12/31/2018**

**Executed on:**
- **Date:** 12/31/2018

**By:**
- **Signature:**
  - Treasurer or Assistant Treasurer

**Executed on:**
- **Date:**

**By:**
- **Signature:**
  - Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

**Executed on:**
- **Date:**

**By:**
- **Signature:**
  - Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Executed on:**
- **Date:**

**By:**
- **Signature:**
  - Signature of Controlling Officeholder, Candidate, State Measure Proponent

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**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 OFFICEHOLDER OR CANDIDATE
DR. MIGUEL LOPEZ FOR MAYOR 2018

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
2541 Taffrail Ln. Oxnard CA 93035

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)</td>
<td></td>
</tr>
</tbody>
</table>

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

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

| NAME OF OFFICEHOLDER, 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 OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD |
| SUPPORT | OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD |
| SUPPORT | OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD |
| SUPPORT | OPPOSE |

Attach continuation sheets if necessary
### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
<th>Calendar Year Summary for Candidates Running in Both the State Primary and General Elections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Financial data for candidates running in both state primary and general elections.</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$-1,058.65</td>
<td>$-3,021.67</td>
<td>Financial data for candidates running in both state primary and general elections.</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>Add Lines 1 + 2</td>
<td>Financial data for candidates running in both state primary and general elections.</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Financial data for candidates running in both state primary and general elections.</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>Add Lines 3 + 4</td>
<td>Financial data for candidates running in both state primary and general elections.</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
<th>Expenditure Limit Summary for State Candidates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$72.00</td>
<td>$144.00</td>
<td>Financial data for state candidates</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Financial data for state candidates</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>Add Lines 6 + 7</td>
<td>Financial data for state candidates</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Financial data for state candidates</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Financial data for state candidates</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>Add Lines 8 + 9 + 10</td>
<td>Financial data for state candidates</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$1,170.43</td>
<td></td>
</tr>
<tr>
<td>Cash Receipts</td>
<td>$-1,058.65</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td>$119.90</td>
<td></td>
</tr>
<tr>
<td>Cash Payments</td>
<td>$72.00</td>
<td></td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>$0.00</td>
<td></td>
</tr>
</tbody>
</table>

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 the calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Equivalents</td>
<td></td>
</tr>
<tr>
<td>Outstanding Debts</td>
<td></td>
</tr>
</tbody>
</table>

See instructions on reverse for calculation details.
## Schedule B – Part 1
Loans Received

### Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Full Name, Street Address and Zip Code of Lender (If Committee, also enter I.D. Number)</th>
<th>Outstanding Balance Beginning This Period</th>
<th>Amount Received This Period</th>
<th>Amount Paid or Forgiven This Period</th>
<th>Outstanding Balance at Close of This Period</th>
<th>Interest Paid This Period</th>
<th>Original Amount of Loan</th>
<th>Cumulative Contributions to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Miguel Lopez 2541 Taffrail Ln. Oxnard, CA 93035</td>
<td>$960.55</td>
<td>$858.18</td>
<td>$30.47</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eva E. Lopez Retired 2541 Taffrail Ln. Oxnard, CA 93035</td>
<td>$170.00</td>
<td>$170.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Subtotals

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td><strong>1,058.65</strong></td>
<td>$</td>
</tr>
</tbody>
</table>

### Schedule B Summary

1. Loans received this period .................................................. $
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period ....................................... $ **1,058.65**
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) .................. NET $ **-1,058.65**
   (May be a negative number)

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

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Calendar Year

Per Election**

**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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## Schedule E Payments Made

### See Instructions on Reverse

**NAME OF FILER**

DR. MIGUEL LOPEZ FOR MAYOR 2018

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

- CMP campaign paraphernalia/misc.
- CNS 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 l.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)

### NAME AND ADDRESS OF PAYEE

(If committee, also enter I.D. number)

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
</tr>
</thead>
</table>

| AMOUNT PAID |

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

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ........................................... $  
2. Unitemized payments made this period of under $100 ............................................................ $ 72.00  
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .......... $  72.00  
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .................................................. TOTAL $  72.00  

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### Schedule I Summary

1. Itemized increases to cash this period: ................................................................. $ 119.90
2. Unitemized increases to cash of under $100 this period: ....................................................... $ 119.90
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .......... $
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ................................................................. TOTAL $ 119.90

**SUBTOTAL $**