Recipient Committee
Campaign Statement
Cover Page

Statement covers period
from 7/01/2018
through 9/22/2018

Date of election if applicable:
(Month, Day, Year)
NOV. 6, 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 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:**
   - [x] Preelection Statement
   - [ ] Quarterly Statement
   - [ ] Semi-annual Statement
   - [ ] Special Odd-Year Report
   - [ ] Amendment (Explain below)

**CORRECTION OF SUMMARY PAGE**

3. **Committee Information**
   - I.D. NUMBER: FPPC1410358
   - COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE):
     CAROLINA GALLARDO-MAGANA FOR CITY COUNCIL 2018
   - STREET ADDRESS (NO P.O. BOX):
     130 CARLISLE CT.
   - CITY: OXNARD
   - STATE: CA
   - ZIP CODE: 93033
   - AREA CODE/PHONE: 805 612-4925
   - MAILING ADDRESS (IF DIFFERENT NO. AND STREET OR P.O. BOX):
     SAME AS ABOVE
   - CITY:
   - STATE:
   - ZIP CODE:
   - AREA CODE/PHONE:
   - 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 1/31/19
   Date

   By (Signature of Treasurer or Assistant Treasurer)

   Executed on 1/31/19
   Date

   By (Signature of Controlling Officier, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

   Executed on
   Date

   By (Signature of Controlling Officier, Candidate, State Measure Proponent)

   Executed on
   Date

   By (Signature of Controlling Officier, Candidate, State Measure Proponent)
## Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</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>$298.00</td>
<td>$298.00</td>
<td>1/1 through 6/30 7/1 to Date</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$3,500.00</td>
<td>$3,500.00</td>
<td></td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$3,798.00</td>
<td>$3,798.00</td>
<td></td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$0</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$3,798.00</td>
<td>$3,798.00</td>
<td></td>
</tr>
</tbody>
</table>

## Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$3,173.00</td>
<td>$3,173.00</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$3,173.00</td>
<td>$3,173.00</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$3,173.00</td>
<td>$3,173.00</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>$0</td>
<td></td>
</tr>
<tr>
<td>Cash Receipts</td>
<td>$3,798.00</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Cash Payments</td>
<td>$3,173.00</td>
<td></td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>$625.00</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 this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

## Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Election (mm/dd/yy)</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Total to Date</td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

*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>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Equivalents</td>
<td></td>
<td>$3,500.00</td>
</tr>
<tr>
<td>Outstanding Debts</td>
<td></td>
<td>$3,500.00</td>
</tr>
</tbody>
</table>

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