Statement of Organization
Recipient Committee

1. Committee Information

NAME OF COMMITTEE: Committee to Elect Money Nuñez for Oxnard Mayor 2019

STREET ADDRESS (NO P.O. BOX): 410 E. P.V. Rd. Apt. #4
CITY: Oxnard
STATE: CA
ZIP CODE: 93033

MAILING ADDRESS (IF DIFFERENT): Money Nuñez
MAIL: "Email: com.

COUNTY OF Domicile: Oxnard, CA

I.D. Number (If applicable): [Blank]

2. Treasurer and Other Principal Officers

NAME OF TREASURER: Robert Duonick
STREET ADDRESS (NO P.O. BOX): 8 Gardenia St
CITY: Ladera Ranch
STATE: CA
ZIP CODE: 92694

NAME OF ASSISTANT TREASURER, IF ANY: [Blank]
STREET ADDRESS (NO P.O. BOX): [Blank]
CITY: [Blank]
STATE: [Blank]
ZIP CODE: [Blank]

NAME OF PRINCIPAL OFFICER(S): Money Nuñez
STREET ADDRESS (NO P.O. BOX): 410 E. P.V. Rd. Apt. #4
CITY: Oxnard
STATE: CA
ZIP CODE: 93033

3. Verification

I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein 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 1/30/19
Executed on 1/30/19
Executed on [Blank]
Executed on [Blank]