# Recipient Committee Campaign Statement Cover Page

**Statement covers period:**

- **from:** 1-1-2019
- **through:** 6-30-2019

**Date of election if applicable:**

- **(Month, Day, Year):**

- **Date Stamp:**
  - **2019 JUL 25 PM**
  - **Oxnard City C**

## 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)
  - □ Primarily Formed Ballot Measure Committee
  - □ Primarily Formed Candidate/Officerholder Committee
  - □ Sponsored
  - □ Small Contributor Committee
  - □ Political Party/Central Committee

## 2. Type of Statement:

- □ Preliminary Statement
- □ Semi-annual Statement (Also file a Form 410 Termination)
- □ Amendment (Explain below)
- □ Quarterly Statement
- □ Special Odd-Year Report

## 3. Committee Information

- **I.D. NUMBER:** 96-1270
- **COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE):**
  - Oxnard Chamber of Commerce - PAC

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

- **400 E Esplanade Dr #302**

### CITY

- **Oxnard**

### STATE

- **CA**

### ZIP CODE

- **93036**

### AREA CODE/PHONE

- **805-983-6118**

### MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

### CITY

### STATE

### ZIP CODE

### AREA CODE/PHONE

### OPTIONAL: FAX / E-MAIL ADDRESS

### NAME OF TREASURER

- **AMY FONZO**

### MAILING ADDRESS

- **400 E ESPLANADE DR #302**

### CITY

- **OXNARD**

### STATE

- **CA**

### ZIP CODE

- **93036**

### AREA CODE/PHONE

- **805-983-6118**

### NAME OF ASSISTANT TREASURER, IF ANY

### MAILING ADDRESS

### 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:**

- **JULY 17, 2019**

**Date**

**By:**

**Signature of Treasurer or Assistant Treasurer**

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

**Signature of Controlling Officeholder, Candidate, State Measure Proponent**

**Signature of Controlling Officeholder, Candidate, State Measure Proponent**
# Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

**Statement covers period**

- **from:** 1-1-2019
- **through:** 6-30-2019

**Calendar Year Summary for Candidates Running in Both the State Primary and General Elections**

- **1/1 through 6/30:** 7/1 to Date

<table>
<thead>
<tr>
<th>Contributions Received</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Monetary Contributions</strong></td>
<td>Schedule A, Line 3</td>
<td>4800</td>
</tr>
<tr>
<td><strong>Loans Received</strong></td>
<td>Schedule B, Line 3</td>
<td>0</td>
</tr>
<tr>
<td><strong>SUBTOTAL CASH CONTRIBUTIONS</strong></td>
<td>Add Lines 1 + 2</td>
<td>4800</td>
</tr>
<tr>
<td><strong>Nonmonetary Contributions</strong></td>
<td>Schedule C, Line 3</td>
<td>0</td>
</tr>
<tr>
<td><strong>TOTAL CONTRIBUTIONS RECEIVED</strong></td>
<td>Add Lines 3 + 4</td>
<td>4800</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Current Cash Statement</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Beginning Cash Balance</strong></td>
<td><strong>Previous Summary Page, Line 16</strong></td>
<td>18676</td>
</tr>
<tr>
<td><strong>Cash Receipts</strong></td>
<td><strong>Column A, Line 3 above</strong></td>
<td>4800</td>
</tr>
<tr>
<td><strong>Miscellaneous Increases to Cash</strong></td>
<td><strong>Schedule I, Line 4</strong></td>
<td>10</td>
</tr>
<tr>
<td><strong>Cash Payments</strong></td>
<td><strong>Column A, Line 8 above</strong></td>
<td>800</td>
</tr>
<tr>
<td><strong>ENDING CASH BALANCE</strong></td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15</td>
<td>$22686</td>
</tr>
</tbody>
</table>

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

**Cash Equivalents and Outstanding Debts**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cash Equivalents</strong></td>
<td><strong>See instructions on reverse</strong></td>
</tr>
<tr>
<td><strong>Outstanding Debts</strong></td>
<td><strong>Add Line 2 + Line 9 in Column B above</strong></td>
</tr>
</tbody>
</table>

**Calendar Form 460**

Page 2 of 7

**I.D. NUMBER**

96-1270

**Expenditure Limit Summary for State Candidates**

<table>
<thead>
<tr>
<th>22. Cumulative Expenditures Made</th>
<th>Date of Election (mm/dd/yyyy)</th>
<th>Total to Date</th>
</tr>
</thead>
</table>
| *Amounts in this section may be different from amounts reported in Column B.*

**FPCC Form 460 (Jan/2016)**

FPCC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov
### Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .............................................. $ 0
2. Amount received this period – unitemized monetary contributions of less than $100 ............................... $ 4800
3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ............... TOTAL $ 4800

*Contributor Codes
IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

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

Amounts may be rounded to whole dollars.

**Statement covers period**
from 1-1-2019
through 6-30-2019

<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>6-30-2019</td>
<td>THRU INTERMEDIARY OXNARD CHAMBER 400 E ESPLANADE DR #302 OXNARD CA 93036</td>
<td></td>
<td></td>
<td>650</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ALL ARE VOLUNTARY CONTRIBUTIONS NONE EQUAL $100 OR MORE

*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

**SUBTOTAL $** 650
Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Amounts may be rounded to whole dollars.

Statement covers period from 1-1-2019 through 6-30-2019

CALIFORNIA FORM 460
Page 5 of 7

OXNARD CHAMBER OF COMMERCE - PAC

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE</th>
<th>TYPE OF PAYMENT</th>
<th>DESCRIPTION (IF REQUIRED)</th>
<th>AMOUNT 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>6-5-2019</td>
<td>KELLY LONG FOR SUPERVISOR 2020 5235 MISSION OAKS BLVD #371 CAMARILLO CA 93012</td>
<td>☑ Monetary Contribution</td>
<td>FPPC #1417089</td>
<td>750</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☑ Support ☐ Oppose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SUBTOTAL $ 750

Schedule D Summary
1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals) ......................................................... $ 750
2. Unitemized contributions and independent expenditures made this period of under $100 .................................................................................................... $ 0
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ........ TOTAL $ 750

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

**Payments Made**

**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` 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>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CALIFORNIA SECRETARY OF STATE</strong></td>
<td>FIL</td>
<td>ANNUAL FILING FEE</td>
<td>50</td>
</tr>
</tbody>
</table>

*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.) ................................................................. $ 0
2. Unitemized payments made this period of under $100 ......................................................................................... $ 50
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.) ........ $ 50

**SUBTOTAL $** 50

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*FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov*
# Schedule I
## Miscellaneous Increases to Cash

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>CALIFORNIA FORM 460</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 1-1-2019</td>
<td></td>
</tr>
<tr>
<td>through 6-30-2019</td>
<td></td>
</tr>
</tbody>
</table>

### OXNARD CHAMBER OF COMMERCE - PAC

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name and Address of Source</th>
<th>Description of Receipt</th>
<th>Amount of Increase to Cash</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-30-2019</td>
<td>CITIZENS BUSINESS BANK</td>
<td>INTEREST</td>
<td>10</td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

### Schedule I Summary

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Itemized increases to cash this period.</td>
<td>$0</td>
</tr>
<tr>
<td>2. Unitemized increases to cash of under $100 this period.</td>
<td>$10</td>
</tr>
<tr>
<td>3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)</td>
<td>$0</td>
</tr>
<tr>
<td>4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)</td>
<td>$10</td>
</tr>
</tbody>
</table>