

497 Contribution Report

Amounts may be rounded to whole dollars.

NAME OF FILER Committee to Elect Ronald Arruejo for Oxnard City Council 2020			Date of This Filing 09/24/2020	Date Stamp Oxnard City Clerk SEP 24 PM 12:46	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (805) 822 - 7250	I.D. NUMBER (if applicable) 1428442		Report No. 1 2020		
STREET ADDRESS 2013 Milagro Place			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Oxnard	STATE CA	ZIP CODE 93030	No. of Pages 2		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
August 25, 2020	Ronald James Arruejo Redacted Oxnard, CA 93030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Financial Management Specialist NAWCWD Point Mugu	2,000 <input type="checkbox"/> Check if Loan 0 % Provide interest rate
September 14, 2020	Ronald James Arruejo Redacted Oxnard, CA 93030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Financial Management Specialist NAWCWD Point Mugu	2,000 <input type="checkbox"/> Check if Loan % Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan % Provide interest rate

Reason for Amendment: _____

* 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

497 Contribution Report

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NAME OF FILER Committee to Elect Ronald Arruejo for Oxnard City Council 2020			Date of This Filing 09/24/2020	Date Stamp 2020 SEP 24 PM 12:45	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (805) 822 - 7250	I.D. NUMBER (if applicable) 1428442		Report No. 1		
STREET ADDRESS 2013 Milagro Place			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
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July 11, 2020	Ronald James Arruejo Redacted Oxnard, CA 93030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Financial Management Specialist NAWCWD Point Mugu	12,000 <input checked="" type="checkbox"/> Check if Loan 0 % Provide interest rate
July 11, 2020	Ronald James Arruejo Redacted Oxnard, CA 93030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Financial Management Specialist NAWCWD Point Mugu	500 <input type="checkbox"/> Check if Loan % Provide interest rate
August 15, 2020	Ronald James Arruejo Redacted Oxnard, CA 93030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Financial Management Specialist NAWCWD Point Mugu	3,500 <input type="checkbox"/> Check if Loan % Provide interest rate

Reason for Amendment: _____

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