

**Recipient Committee
Campaign Statement
Cover Page**

Received
Oxnard City Clerk

Date Stamp

CALIFORNIA FORM **460**

Page 1 of 12

For Official Use Only

Statement covers period
from 1 Jul 2016
through 24 Sep 2016

Date of election if applicable:
(Month, Day, Year)
2016 SEP 29 AM 9:46
Nov 8, 2016

SEE INSTRUCTIONS ON REVERSE

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:

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

3. Committee Information

I.D. NUMBER
1388268

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Steve Huber for Oxnard City Council 2016

STREET ADDRESS (NO P.O. BOX)
1411 Ebony Drive

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Oxnard	CA	93030	(805) 509-9214

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
Steve4Oxnard@gmail.com

Treasurer(s)

NAME OF TREASURER
Eileen Huber

MAILING ADDRESS
1411 Ebony Drive

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Oxnard	CA	93030	(805) 981-0858

NAME OF ASSISTANT TREASURER, IF ANY
Steve Huber

MAILING ADDRESS
1411 Ebony Drive

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Oxnard	CA	93030	(805) 981-0858

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 27 Sept 2016
Date

Executed on 27 Sept 2016
Date

Executed on _____
Date

Executed on _____
Date

By Eileen M Huber
Signature of Treasurer or Assistant Treasurer

By Steve Huber
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Stephen H. Huber

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

Oxnard City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

1411 Ebony Drive Oxnard CA 93030

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.*

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------	---

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

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------	---

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

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
----------------------	--------------	---

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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>1 Jul 2016</u> through <u>24 Sep 2016</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>12</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Stephen H. Huber

I.D. NUMBER

1388268

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ <u>21270.99</u>	\$ <u>21270.99</u>
2. Loans Received..... Schedule B, Line 3	\$ <u>6500.00</u>	\$ <u>6500.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>27770.99</u>	\$ <u>27770.99</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	\$ <u>14.50</u>	\$ <u>14.50</u>
5. TOTAL CONTRIBUTIONS RECEIVED.....Add Lines 3 + 4	\$ <u>27785.49</u>	\$ <u>27785.49</u>

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... Schedule E, Line 4	\$ <u>16097.40</u>	\$ <u>16097.40</u>
7. Loans Made..... Schedule H, Line 3	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>16097.40</u>	\$ <u>16097.40</u>
9. Accrued Expenses (Unpaid Bills).....Schedule F, Line 3	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$ <u>14.50</u>	\$ <u>14.50</u>
11. TOTAL EXPENDITURES MADE.....Add Lines 8 + 9 + 10	\$ <u>16111.90</u>	\$ <u>16111.90</u>

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>0</u>
13. Cash Receipts..... Column A, Line 3 above	\$ <u>27770.99</u>
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$ <u>0</u>
15. Cash Payments..... Column A, Line 8 above	\$ <u>16097.40</u>
16. ENDING CASH BALANCE.....Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>11673.59</u>

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

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$ <u>0</u>
--	-------------

Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... See instructions on reverse	\$ <u>0</u>
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ <u>6500.00</u>

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).

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

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

Statement covers period from <u>1 Jul 2016</u> through <u>24 Sep 2016</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>12</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Stephen H. Huber	I.D. NUMBER 1388268
--	-------------------------------

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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	See attached sheets	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	\$ <u>20,250.00</u>
2. Amount received this period – unitemized monetary contributions of less than \$100	\$ <u>1,020.99</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....	TOTAL \$ <u>21,270.99</u>

*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

FPPC Form 460 Schedule A (Continuation Sheet)			Statement covers period		California Form 460	
Committee to Elect Steve Huber to Oxnard City Council 2014			from	1-Jul-16	Page 5 of 2	
			through	24-Sep-16	ID Number	1388268
Date Received	Full Name	Street Address, City and Zip Code	Contributor Code	Occupation and Employer	Amt Rec'vd This Period	Cumulative to date (CY 2016)
8/15/2016	Anthony Murguia	1012 Spyglass Trail East, Oxnard, CA 93036	IND	Retired	\$250.00	\$250.00
8/15/2016	Kristie Elzinga	1702 Emerald Isle Way, Oxnard, CA 93035	IND	Retired	\$100.00	\$100.00
8/15/2016	Thomas E Laubacher, Jr.	2035 Spyglass Trail West, Oxnard, Ca 93036	IND	Insurance Broker Hub International Insurance	\$500.00	\$500.00
8/16/2016	Diane Suskin	1400 Ebony Drive, Oxnard, CA 93030	IND	Retired	\$150.00	\$150.00
8/17/2016	Rebecca B Berg	540 Broderick Way, Port Hueneme, CA 93041	IND	none	\$100.00	\$100.00
8/18/2016	John P Fitzgerald	2073 Spyglass Trail E, Oxnard, CA 93036	IND	Self/Byers-Fitzgerald Commercial Real Estate	\$250.00	\$250.00
8/18/2016	James B Lasswell	13366 Windstanley Way, San Diego, CA 92130	IND	Engineer/Business Owner Indus Technology, Inc.	\$500.00	\$500.00
8/24/2016	Stephen J Maulhardt	961 N Rice Ave #1, Oxnard, CA 93030	IND	Property Manager Maulhardt Properties	\$200.00	\$200.00
8/26/2016	Dean Maulhardt	112 Estaban Drive, Camarillo, CA 93010	IND	Retired	\$200.00	\$200.00
8/27/2016	Paul Grossgold	989 Garrido Drive, Camarillo, CA 93010	IND	Retired	\$200.00	\$200.00
8/27/2016	Jill Nieves	3122 Brookwood Lane, Oxnard, CA 93036	IND	Retired	\$100.00	\$100.00
8/27/2016	Bradley Marcus	4137 Ocean Drive, Oxnard, CA 93035	IND	Retired	\$100.00	\$100.00
8/27/2016	Priscilla Herrera	1424 Ebb Court, Oxnard, CA 93035	IND	Retired	\$100.00	\$100.00
8/27/2016	George Lauterbach	300 Montgomery Ave, Oxnard CA 93030	IND	Owner Lauterbach and Associates	\$200.00	\$200.00
SUBTOTAL \$					\$2,950.00	

FPPC Form 460 Schedule A (Continuation Sheet)			Statement covers period		California Form 460	
Committee to Elect Steve Huber to Oxnard City Council 2014			from	1-Jul-16	Page 6 of 12	
			through	24-Sep-16	ID Number	1388268
Date Received	Full Name	Street Address, City and Zip Code	Contributor Code	Occupation and Employer	Amt Rec'd This Period	Cumulative to date (CY 2016)
8/27/2016	Patricia Hart	4530 La Brea Street, Oxnard CA 93035	IND	Retired	\$100.00	\$100.00
8/27/2016	Anthony Volante	2534 Oceanmist Court, Port Hueneme, 93041	IND	Retired	\$100.00	\$100.00
8/27/2016	Andrea Payne	2012 Spyglass Trail East, Oxnard CA 93036	IND	School Psychologist Oxnard Union High School District	\$100.00	\$100.00
8/27/2016	Oxnard Chamber of Commerce PAC	400 E Esplanade Drive, Suite 302 Oxnard, CA 93036	COM	FPPC# 961270	\$950.00	\$950.00
8/27/2016	Irene Pinkard	2047 Spyglass Trail East, Oxnard, CA 93036	IND	Retired	\$100.00	\$100.00
8/27/2016	Kim Gibas	2140 El Cajon Way, Oxnard, CA 93035	IND	Head of Branch Administration Ojai Community Bank	\$150.00	\$150.00
8/27/2016	Patricia Paumier	1930 Westchester Court, Oxnard, CA 93036	IND	Gift Store Manager/St. John's Hospital	\$100.00	\$100.00
8/27/2016	Mike Barber	3701 Orange Drive, Oxnard, CA 93036	IND	Retired	\$150.00	\$150.00
8/27/2016	Sal Gonzalez	1216 Jamaica Lane, Oxnard, CA 93030	IND	Retired	\$100.00	\$100.00
8/30/2016	Jurgen Gramckow	1060 Shokat Dr., Ojai, CA 93023	IND	Owner Southland Sod	\$1,000.00	\$1,000.00
8/30/2016	Anthony R. Murguia III	2131 Brook Hollow Court, Oxnard, CA 93036	IND	HR Dir Meggitt Systems	\$100.00	\$100.00
8/30/2016	Annette Robles	2630 Volcano Court, Oxnard, CA 93030	IND	School Psychologist Oxnard Elementary School District	\$100.00	\$100.00
9/3/2016	Alpha Products, Inc.	351 Irving Drive, Oxnard, CA 93030	OTH		\$500.00	\$500.00
9/6/2016	Robert Cotterell	11185 Forestview Lane, San Diego, CA 92131	IND	Airline Captain Southwest Airlines	\$200.00	\$200.00
9/6/2016	Lyndon R. Shaftoe	3634 Sunset Lane, Oxnard, CA 93035	IND	Retired	\$250.00	\$250.00
SUBTOTAL \$					\$4,000.00	

FPPC Form 460 Schedule A (Continuation Sheet)			Statement covers period		California Form 460	
Committee to Elect Steve Huber to Oxnard City Council 2014			from	<u>1-Jul-16</u>	Page <u>7</u> of <u>12</u>	
			through	<u>24-Sep-16</u>	ID Number	1388268
Date Received	Full Name	Street Address, City and Zip Code	Contributor Code	Occupation and Employer	Amt Rec'vd This Period	Cumulative to date (CY 2016)
9/6/2016	Patricia B. Taormina	2551 Cabrillo Way, Oxnard, CA 93030	IND	Retired	\$200.00	\$200.00
9/6/2016	Anthony J. Taormina	2551 Cabrillo Way, Oxnard, CA 93030	IND	Principal/Owner Port Directions LLC	\$300.00	\$300.00
9/7/2016	Oxnard Firefighters Local 1684 P.A.C.	249 Calle Larios, Camarillo, CA 93010	COM	PAC ID# 801523	\$1,000.00	\$1,000.00
9/7/2016	Margaret M Doherty	1415 Sandelin Ave., San Leandro, CA 94577	IND	Retired	\$100.00	\$100.00
9/8/2016	Dr. Eduardo Miranda	2600 Pyrite Place, Oxnard, CA 93030	IND	Police Commander City of Oxnard	\$100.00	\$100.00
9/8/2016	Charles W. McLaughlin	2230 Greencastle Lane, Oxnard, CA 93035	IND	Pilot Aspen Helicopters	\$1,000.00	\$1,000.00
9/9/2016	Channel Islands Logistics, Inc.	701 Del Norte Blvd., Oxnard, CA 93030	OTH		\$5,000.00	\$5,000.00
9/12/2016	Alan L. Maulhardt	10355 N. Creek Road, Oak View, CA 93022	IND	Tax Preparer H&R Block	\$200.00	\$200.00
9/13/2016	Laborers Int. Union of North America Local 585, AFL-CIO PAC	21 South Dos Caminos Avenue, Ventura, CA 93003	COM	PAC ID# 1319072	\$750.00	\$750.00
9/13/2016	Paula Doherty	47330 Galindo Dr., Fremont, CA 94539	IND	Retired	\$200.00	\$200.00
9/13/2016	Janice Turner	2104 Rhonda Street, Oxnard, CA 93036	IND	Retired	\$100.00	\$100.00
9/15/2016	Steven Kinney	2512 Bayridge Court, Port Hueneme, CA 93041	IND	Retired	\$100.00	\$100.00
9/15/2016	Michael Gurley	3320 Corte Esplendor, Carlsbad, CA 92009	IND	Consultant/ATT	\$300.00	\$300.00
9/15/2016	River Park Executive Suites	1000 Town Center Dr., Oxnard, CA 93036	OTH		\$100.00	\$100.00
9/15/2016	Al Barkley	155 South G Street, Oxnard, CA 93030	IND	Insurance Broker Barkley Insurance	\$250.00	\$250.00
SUBTOTAL \$					\$9,700.00	

FPPC Form 460 Schedule A (Continuation Sheet)			Statement covers period		California Form 460	
Committee to Elect Steve Huber to Oxnard City Council 2014			from	<u>1-Jul-16</u>	Page <u>8</u> of <u>12</u>	
			through	<u>24-Sep-16</u>	ID Number	1388268
Date Received	Full Name	Street Address, City and Zip Code	Contributor Code	Occupation and Employer	Amt Rec'vd This Period	Cumulative to date (CY 2016)
9/15/2016	Committee to Elect John C. Zaragoza for Supervisor	2303 Hidden Valley Court, Oxnard, CA 93036	COM	FPPC# 1298947	\$200.00	\$200.00
9/16/2016	Charles A. Covarrubias	416 Glenwood Drive, Oxnard, CA 93030	IND	Real Estate Broker Alert Real Estate Services, Inc.	\$100.00	\$100.00
9/17/2016	Nancy Lindholm	2300 Diamond Head Way, Oxnard, CA 93036	IND	CEO/Oxnard Chamber of Commerce	\$100.00	\$100.00
9/19/2016	Oxnard Chamber of Commerce PAC	400 E Esplanade Drive, Suite 302 Oxnard, CA 93036	COM	FPPC# 961270	\$1,050.00	\$2,000.00
9/20/2016	Fred J Ferro	1110 E. Center Rd., Somis, CA 93066	IND	Realtor/NAI Capitol	\$250.00	\$250.00
9/20/2016	Martin L. Remmen	2531 Lions Gate Dr., Oxnard, CA 93030	IND	General Manager Shooters Paradise of Oxnard	\$250.00	\$250.00
9/21/2016	Armando J Lopez	2023 Keltic Lodge Dr., Oxnard, CA 93036	IND	Developer/Self Plaza Associates	\$500.00	\$500.00
9/22/2016	Earnest E. Eglin	2041 Lennox Ct., Oxnard, CA 93030	IND	Retired	\$100.00	\$100.00
9/22/2016	Gregory Ramirez	3140 Strathmore Dr., Ventura, CA 93003	IND	Lawyer/Ball and Yorke	\$250.00	\$250.00
9/23/2016	Pegasus Transit	210 Breedy St., Oxnard, CA 93036	OTH		\$500.00	\$500.00
9/23/2016	Terri Scheid	2105 Olga Street, Oxnard, CA 93036	IND	Retired	\$200.00	\$200.00
9/24/2016	Dan Dolby	2621 Bellerive Court, Oxnard, CA 93036	IND	Broker Dolby Insurance	\$100.00	\$100.00
SUBTOTAL \$					\$3,600.00	

**Schedule B – Part 1
Loans Received**

Amounts may be rounded
to whole dollars.

Statement covers period from <u>1 Jul 2016</u> through <u>24 Sep 2016</u>	CALIFORNIA FORM 460
	Page <u>9</u> of <u>12</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Stephen H. Huber

I.D. NUMBER

1388268

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Stephen H. Huber 1411 Ebony Drive Oxnard, CA 93030 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	self employed SHHuber and Associates, Inc	\$ <u>0</u>	\$ <u>1000</u>	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ <u>1000</u> DATE DUE _____	<u>0</u> % RATE \$ _____	\$ <u>1000</u> <u>7/22/2016</u> DATE INCURRED	CALENDAR YEAR \$ <u>1000</u> PER ELECTION** \$ _____
Stephen H. Huber 1411 Ebony Drive Oxnard, CA 93030 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	self employed SHHuber & Associates, Inc	\$ <u>0</u>	\$ <u>500</u>	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ <u>500</u> DATE DUE _____	<u>0</u> % RATE \$ _____	\$ <u>500</u> <u>8/10/2016</u> DATE INCURRED	CALENDAR YEAR \$ <u>1500</u> PER ELECTION** \$ _____
Stephen H. Huber 1411 Ebony Drive Oxnard, CA 93030 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	self employed SHHuber & Associates, Inc	\$ <u>0</u>	\$ <u>5000</u>	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ <u>5000</u> DATE DUE _____	<u>0</u> % RATE \$ _____	\$ <u>5000</u> <u>8/18/2016</u> DATE INCURRED	CALENDAR YEAR \$ <u>6500</u> PER ELECTION** \$ _____
SUBTOTALS \$								

(Enter (e) on
Schedule E, Line 3)

Schedule B Summary

- Loans received this period \$ 6500.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) **NET \$** 6500.00
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

†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

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

Schedule C Nonmonetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>1 Jul 2016</u> through <u>24 Sep 2016</u>	CALIFORNIA FORM 460
	Page <u>10</u> of <u>12</u>
I.D. NUMBER 1388268	

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Stephen H. Huber

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
					SUBTOTAL \$		

Attach additional information on appropriately labeled continuation sheets.

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.).....	\$ <u>0</u>
2. Amount received this period – unitemized nonmonetary contributions of less than \$100	\$ <u>14.50</u>
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....	TOTAL \$ <u>14.50</u>

*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

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	1 Jul 2016	
through	24 Sep 2016	Page 11 of 12
I.D. NUMBER		1388268

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Stephen H. Huber

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

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
City of Oxnard 300 West 3rd Street Oxnard, CA 93030	FIL		1,300.00
Fresh and Fabulous 221 West 5th Street Oxnard, Ca 93030	FND		472.62
Rincon, LLC 80 Wood Road, Suite 302 Camarillo, CA 93010	CNS		2,000.00

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

SUBTOTAL \$ 3772.62

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	15896.27
2. Unitemized payments made this period of under \$100.....	\$	201.13
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.).....	TOTAL \$	16097.40

Schedule E Payments Made (Continuation Sheet)			Statement covers period	California Form 468
NAME OF FILER			from 1 Jul 2016	Page 12 of 12
Stephen H. Huber			through 24 Sep 2016	ID Number 1388268
Date	Name Address of Payee	Code	Description of Payment	Amount Paid
8/30/2016	El Concilio Family Services 301 S C St, Oxnard, CA 93030	CMP		\$100.00
9/6/2016	Aswell Trophy 235 N. Oxnard Blvd, Oxnard, CA 93030	CMP		\$151.20
9/14/2016	Rincon, LLC 80 Wood Rd Suite 302, Camarillo, CA 93010	LIT		\$422.39
9/15/2016	Tri-Counties Central Labor Council 816 Camarillo Springs Rd. Ste. G, Camarillo, CA 93010	PRT		\$600.00
9/14/2016	Wedgewood at the Tower Club 300 E Esplanade Dr, Oxnard, CA 93036	FND		\$235.00
9/14/2016	Wedgewood at the Tower Club 300 E Esplanade Dr, Oxnard, CA 93036	FND		\$1,266.42
9/16/2016	US Postal Services 350 South A Street, Oxnard, CA 93030	POS	8/30 and 9/16 purchases	\$188.00
9/18/2016	Rincon, LLC 80 Wood Rd Suite 302, Camarillo, CA 93010	LIT		\$134.40
9/21/2016	Rincon, LLC 80 Wood Rd Suite 302, Camarillo, CA 93010	LIT		\$521.24
9/20/2016	COPS Voter Guide, Inc 705-2 E. Bidwell Street #370, Folsom, CA 95630	LIT		\$2,250.00
9/20/2016	Landscape Communications 30011 Ivy Glenn Rd., Laguna Niguel, CA 92677	LIT		\$4,380.00
9/20/2016	Rincon LLC 80 Wood Rd Suite 302, Camarillo, CA 93010	WEB		\$1,875.00
SUBTOTAL				\$12,123.65