| Recipient Committee Campaign Statement Cover Page | | | Date Stamp Receive Oxnard City | |
|---|--|---|--------------------------------|--|
| | Statement covers period from Sep 23 2018 | Date of election if applicable: (Month, Day, Year) | 2018 OCT 25 PM | Page 1 of 21 |
| SEE INSTRUCTIONS ON REVERSE | through Oct 20 2018 | Nov 6 2018 | | |
| 1. Type of Recipient Committee: All Committees - Com | nplete Parts 1, 2, 3, and 4. | 2. Type of Statement: | | |
| State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee | rimarily Formed Ballot Measure ommittee) Controlled) Sponsored so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee so Complete Part 7) | Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Ter Amendment (Explain be | ☐ s | Quarterly Statement Special Odd-Year Report |
| 5. Committee information | NUMBER 31(19) | Treasurer(s) | | |
| COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) | | NAME OF TREASURER | | |
| Tim Flynn for Mayor 2018 | | Diane I Flynn | | |
| | | MAILING ADDRESS 234 N L St | | |
| STREET ADDRESS (NO P.O. BOX) | | CITY | STATE ZIF | CODE AREA CODE/PHONE |
| 211 N F St | | Oxnard | | 030 805-486-8976 |
| Oxnard STATE ZIP COD | E AREA CODE/PHONE 805-340-1922 | NAME OF ASSISTANT TREASURER | IF ANY | |
| MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX | | MAILING ADDRESS | | |
| CITY STATE ZIP COD | E AREA CODE/PHONE | CITY. | STATE ZIF | CODE AREA CODE/PHONE |
| OPTIONAL: FAX / E-MAIL ADDRESS | constraint of the first state of the state o | OPTIONAL: FAX / E-MAIL ADDRESS | | artindenne oden den de som den eta sudden eta ason de daŭon de desperondo estrepulara kon kon kon de eventa de |
| Verification I have used all reasonable diligence in preparing and reviewing certify under penalty of periury under the laws of the State of Certify under the laws of Certify und | g this statement and to the best of my | knowledge the information contained h | erein and in the attached | schedules is true and complete. I |

| r nave used all reasonable diligence in preparing and reviewing this stateme | nt and to the per | si oi my knowieuge ine | mormation | contained nerein and in the | e attached schedules is true and comple |
|---|-------------------|------------------------|-----------|-----------------------------|---|
| certify under penalty of perjury under the laws of the State of California that | the foregoing is | true and correct. | | | , , , |
| | | 4 | A | | |
| _ 23 October 2018 | | | | Musing | |

| Executed on | By Signature of Treasurer or Assistant Treasurer |
|-------------|--|
| Executed on | By Signature of Controlling Officeholder, Candidate, State Méasure Proponent or Responsible Officer of Sponsor |
| Executed on | BySignature of Controlling Officeholder, Candidate, State Measure Proponent |
| Executed on | By |

| . Officeholder or Candidate Controlled Commi | ttee | 6. | Primarily Formed Ballo | t Measure | Committee | | |
|--|---|------------|---|---|--|------------------|------------------|
| NAME OF OFFICEHOLDER OR CANDIDATE | | | NAME OF BALLOT MEASURE | etakin pirakin kina kina kina kina kina kina kina | | | |
| Tim Flynn | | | | | | | |
| OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT | NUMBER IF APPLICABLE) | | BALLOT NO. OR LETTER | JURISDICTIO | N | - Course | SUPPORT |
| Mayor, City of Oxnard | | | | | | | OPPOSE |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI | TY STATE ZIP | | | | | | |
| 211 N F St Oxnard | CA 93030 | | Identify the controlling office | | | measure propo | onent, if any. |
| | izante quanto a con el como dimensión de podes de podes como de de medio estrutivo estrutivo procurso instrucia | | NAME OF OFFICEHOLDER, CAN | DIDATE, OR PR | OPONENT | | |
| Related Committees Not Included in this Stat not included in this statement that are controlled by you or contributions or make expenditures on behalf of your candi | are primarily formed to receive | | OFFICE SOUGHT OR HELD | entre et en | | DISTRICT NO. IF | FANY |
| COMMITTEE NAME | I.D. NUMBER | | | | | | |
| Flynn vs Starr Legal Defense Fund | 1412553 | *7 | Primarily Formed Cand | lidata/Offia | ahaldar Ca | mmittaa ii- | t namaa af |
| NAME OF TREASURER | CONTROLLED COMMITTEE? | <i>f</i> u | officeholder(s) or candidate(s) | for which this | committee is p | orimarily formed | t names or I. |
| Diane I Flynn | Į Øyes □no | | NAME OF OFFICEHOLDER OR C | ANDIDATE | OFFICE SOLIC | GHT OR HELD | |
| COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BC | X) | | TANKE OF OFFICE TOESER OR OF | TIDIDITIE | OT TIOE COOK | OITT OITTELL | SUPPORT |
| 211 N F St | DDE AREA CODE/PHONE | | \$50 to the contract of the con | | | | OPPOSE |
| Oxnard CA 9303 | | | NAME OF OFFICEHOLDER OR C | ANDIDATE | OFFICE SOU | GHT OR HELD | ☐ SUPPORT |
| COMMITTEE NAME | J 805-340-1922 II.D. NUMBER | | | | eseesatumout eseesatumout eseesatumout eseesatumout eseesatumout eseesatumout eseesatumout eseesatumout eseesa | | OPPOSE |
| Defeat the Recall Support Mayor Flynn | 1404848 | | NAME OF OFFICEHOLDER OR CA | ANDIDATE | OFFICE SOU | GHT OR HELD | SUPPORT OPPOSE |
| NAME OF TREASURER | CONTROLLED COMMITTEE? | | NAME OF OFFICEHOLDER OR CA | ANDIDATE | OFFICE SOU | GHT OR HELD | ☐ SUPPORT |
| Diane I Flynn COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BC | Z YES NO | | | | | | OPPOSE |
| 211 N F St | vaj | | | | 1 | | |
| CITY STATE ZIP CO | DDE AREA CODE/PHONE | | Atta | ch continuatio | on sheets if ne | aracean/ | |
| Oxnard CA 93030 | | | Passor | on sommude | yn angga n ng | secseu y | |

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

| Summary Page | to whole dollars. | State from | ment covers period Sep 23 2018 | california 460 form |
|-----------------------------|-------------------|---------------|-----------------------------------|----------------------|
| SEE INSTRUCTIONS ON REVERSE | | through | Oct 20 2018 | Page3 of21 |
| NAME OF FILER | | | | I.D. NUMBER |
| Tim Flynn for Mayor 2018 | | | | 1311191 |
| Contributions Passing | Column A | Column B | Calendar Year Sum | nmary for Candidates |

| Contributions Received | (1 | Column A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES) | | Column B CALENDAR YEAR TOTAL TO DATE | Calendar Year Summary for Candidates Running in Both the State Primary and |
|--|----------------|---|-------------|--|---|
| 1. Monetary Contributions Schedule A, Line 3 | \$ | 10541.00 | \$ | 15741.00 | General Elections |
| 2. Loans Received | · | 0 | , | 3000.00 | 1/1 through 6/30 7/1 to Date |
| 3. SUBTOTAL CASH CONTRIBUTIONS | \$ | 10541.00 | \$ | 18741.00 | 20. Contributions Received \$na \$na |
| 4. Nonmonetary Contributions | • | 886.31 | * | 886.31 | 21. Expenditures |
| 5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4 | \$ | 11427.31 | \$ | 19627.31 | Made \$ na \$ na |
| Expenditures Made | | | | | Expenditure Limit Summary for State |
| 6. Payments Made Schedule E, Line 4 | \$ | 10443.14 | \$ | 23649.71 | Candidates |
| 7. Loans Made Schedule H, Line 3 | | 0 | | 0 | |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 | \$ | 10443.14 | \$ | 23649.71 | 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) |
| 9. Accrued Expenses (Unpaid Bills) | | | | 0 | Date of Election Total to Date |
| 10. Nonmonetary Adjustment | | 886.31 | | 886.31 | (mm/dd/yy) |
| 11. TOTAL EXPENDITURES MADE | \$ | 11329.45 | \$ | 24536.02 | /\$na |
| Current Cash Statement | | | | | /\$na |
| 12. Beginning Cash Balance Previous Summary Page, Line 16 | \$ | 2515.50 | То | calculate Column B. | |
| 13. Cash Receipts Column A, Line 3 above | | 10541.00 | add | d amounts in Column | |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4 | | 62.18 | | o the corresponding ounts from Column B | *Amounts in this section may be different from amounts reported in Column B. |
| 15. Cash Payments Column A, Line 8 above | | 10443.14 | | our last report. Some ounts in Column A may | |
| 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 | \$ | 2675.54 | be | negative figures that | |
| If this is a termination statement, Line 16 must be zero. | doiseasemateur | | pre | ould be subtracted from vious period amounts. If is the first report being | |
| 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 | \$ | | file | d for this calendar year, y carry over the amounts | |
| Cash Equivalents and Outstanding Debts | | | fror any | n Lines 2, 7, and 9 (if /). | |
| 18. Cash Equivalents See instructions on reverse | \$ | 0 | | | |
| 19. Outstanding Debts Add Line 2 + Line 9 in Column B above | \$ | 3000.00 | | | FPPC Form 460 (Jan/2016 |
| | | | | | FPPC Advice: advice@fppc.ca.gov (866/275-3772 |

www.fppc.ca.gov

Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA 16

Statement covers period

| <i>•</i> | from | | from Sep 2 | 3 2018 | FORM 400 | |
|--|---|--|--|---|--|--|
| SEE INSTRUCTION | DNS ON REVERSE | | | through Oct | 202018 P | age of |
| NAME OF FILER | for Mayor 2018 | tillede (vertreter sund ikk doord en trigge dalde et mep dat des sunder das sunder dat | | | i |). NUMBER 11191 |
| 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 DAT CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
| 9/24/18 | Grace Nishihara 1819 Narrows Ct Oxnard CA 93030 | IND COM OTH PTY | retired | 100 | 200 | 100 |
| 9/26/18 | Eugene & Patricia West 501 Deodar Av Oxnard CA 93030 | ☑IND □COM □OTH □PTY □SCC | retired | 200 | 400 | 200 |
| 9/27/18 | Larry & Shirley Godwin 3820 San Simeon Av Oxnard CA 93033 | ☑IND □COM □OTH □PTY □SCC | retired | 100 | 150 | 100 |
| 9/28/2018 | Alex Skupien 4124 Harbour Island Dr Oxnard CA 93035 | IND COM OTH PTY SCC | retired | 500 | 500 | 500 |
| 9/28/2018 | Peter Sotelo 2011 Shady Brook Ln Thousand Oaks CA | IND COM OTH PTY SCC | retired | 100 | 100 | 100 |
| | | | SUBTOTAL \$ | 1000 | | |
| Amount re (Include al Amount re Total mone | A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.) ceived this period – unitemized monetary contribution etary contributions received this period. I and 2. Enter here and on the Summary Page, Col | ns of less than | n \$100\$ | 7990.00 2551.00 10541.00 | (o: OTH — Ot PTY — Pol | |
| (Add Lines | s rand z. Enter here and on the Summary Fage, Col | umma, Line i | ./IVIAL \$ | ейноо ючно институтов постоя по совейно предоставления в постоя по совейно предоставления в постоя по совейно | | EDDC Earm 460 (lan /2016) |

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

Sep 23 2018

| | | | | through Oct 2 | 2018 | | 5 of 21 |
|------------------|--|---|--|-----------------------------------|--|------------------|--|
| Tim Flynn fo | or Mayor 2018 | | | | | 1.D. NU 13111 | |
| 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 CALENDAR Y (JAN. 1 - DEC | EAR | PER ELECTION TO DATE (IF REQUIRED) |
| 9/29/2018 | H O'Neil & Cherri Ziegler 1921 Holly Av Oxnard CA 93030 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired/instructor Ventura County Community College District | 100 | 1 | 00 | 100 |
| 9/30/2018 | Anthony & Kristine Behrens 2751 Poli St Oxnard CA 93003 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Self-employed-Anthony Behrens Business Services | 200 | 2 | 00 | 200 |
| 9/30/2018 | Robin Wallace 1034 Pinehurst Pl Camarillo CA 93010 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Self-employed producer | 200 | 2 | 00 | 200 |
| 9/30/2018 | Timothy Hirschberg 5255 Corte Estima #58 Camarillo CA 93012 | ☑IND □COM □OTH □PTY □SCC | Sr. Attorney County of Ventura | 200 | 3 | 00 | 200 |
| 9/30/2018 | Gerry Brown & Gail Weller Brown 2101 Doral Ct Oxnard CA 93036 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 100 | 10 | 00 | 100 |
| | | | SUBTOTAL \$ | 800 | | | |

*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 may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period Sep 23 2018

| | | | | from Sep 23 | 3 2018 | F |)RM | |
|------------------|--|--|--|-----------------------------------|--|---------|------|---|
| | | | | through Oct 2 | 2018 | Page _ | 6 of | 21 |
| NAME OF FILER | | ii kid <u>aan qara kiddii saan karajirinii Walaan karayirinii Walaan karayir</u> a ay a | | | | I.D. NU | MBER | *************************************** |
| Tim Flynn fo | or Mayor 2018 | | | | | 13111 | 91 | |
| 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 CALENDAR YI (JAN. 1 - DEC. | EAR | ТО | ECTION DATE QUIRED) |
| 9/30/2018 | Arturo Casillas 2513 Joshua Ct Oxnard CA 93030 | ☑IND □COM □OTH □PTY □SCC | retired | 200 | 2 | 00 | | 200 |
| 9/30/2018 | Channel Islands Cremation 200 N C St Oxnard CA 93030 | □IND □COM ØOTH □PTY □SCC | | 200 | 2 | 00 | | 200 |
| 9/30/2018 | Larry Downing 745 Ocean View Port Hueneme CA 93041 | IND COM OTH PTY SCC | retired | 100 | 10 | 00 | | 100 |
| 9/30/2018 | Jeremy M Flynn 34150 Starpoint St Temecula CA 92592 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | vice-president sales Eldorado Stone | 52 | 1: | 52 | | 52 |
| 9/30/2018 | Adrienne Gould 3325 Harbor Bl Oxnard CA 93035 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 100 | 10 | 00 | | 100 |

SUBTOTAL \$

600

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

Schedule A (Continuation Sheet)

Amounts may be rounded

SCHEDULE A (CONT.)

| Monetary Contributions Received | to whole | dollars. | Statement cov | ers period 🕞 | ALIFORNIA | 460 |
|---------------------------------|----------|--|---------------|--------------|-----------|---|
| | | | from Sep 2 | 3 2018 | FORM | 460 |
| | | | through Oct 2 | 20 2018 P | ige | of 21 |
| NAME OF FILER | | na katan panan na manan na ma Tanggaran na manan n | | I. | D. NUMBER | - Calor la VIII noch van dehr in haad biskin oo daa oo saana g e |
| Tim Flynn for Mayor 2018 | | | | 13 | 11191 | |
| | | | | | | |

| Veringer management between the periods | | | | | | |
|---|--|--|--|-----------------------------------|---|--|
| 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) |
| 9/30/2018 | Ann Jourdan 4614 Eastbourne Bay Oxnard CA 93035 | ☑IND □COM □OTH □PTY □SCC | self-employed accountant | 100 | 100 | 100 |
| 9/30/2018 | Jess J Herrera 2241 Winged Foot Ct Oxnard CA 93036 | ☑IND □COM □OTH □PTY □SCC | member Oxnard Harbor District Board | 100 | 100 | 100 |
| 9/30/2018 | Tim Laubacher 204 N Ashwood Av Ventura CA 93003 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Financial Services Director DCH Toyota of Oxnard | 100 | 100 | 100 |
| 9/30/2018 | Jim Lavery 2292 Plainfield Pl Oxnard CA 93036 | ☑IND □ COM □ OTH □ PTY □ SCC | retired | 100 | 100 | 100 |
| 9/30/2018 | Frank McCarthy 4804 Paseo Monteluna Camarillo CA 93012 | | owner - Frank S. McCarthy Construction | 200 | 200 | 200 |
| | | | SUBTOTAL \$ | 600 | | |

*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 may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

Sep 23 2018

| | | | | through Oct 2 | 20 2018 | Page _ | 8 of 21 |
|-----------------------------|---|---|--|-----------------------------------|--|------------------|--|
| NAME OF FILER Tim Flynn fo | or Mayor 2018 | | | | | I.D. NU 13111 | |
| 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 CALENDAR YI (JAN. 1 - DEC. | EAR | PER ELECTION TO DATE (IF REQUIRED) |
| 9/30/2018 | Maureen Lenicka 750 Wolcott Av Ventura CA 93003 | IND COM OTH PTY SCC | sales rep Willow House | 50 | 1 | 00 | 50 |
| 9/30/2018 | Mary Meeker 1519 Little Farms Rd Oxnard CA 93030 | OTH SCC | retired | 50 | 1: | 55 | 105 |
| 9/30/2018 | Duane & Christine Mottar PO Box 1788 Oxnard CA 93032 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Duane - retired Christina - teacher Hueneme School District | 200 | 51 | 00 | 200 |
| 9/30/2018 | Robert Murphy 5247 Whitecap St Oxnard CA 93035 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | owner L & L Painting | 70 | 1 | 70 | 70 |
| 9/30/2018 | Patricia Paumier 1930 Westchester Ct Oxnard CA 93036 | IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | St Johns Regional Medical Center gift shop - volunteer | 100 | 20 | 00 | 100 |
| | | | SUBTOTAL S | 300 | | | |

*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 may be rounded

SCHEDULE A (CONT.)

| Monetary Contributions Received | | to whole o | dollars. | Statement cov | ers period | CALIF | ORNIA | 100 | |
|---------------------------------|---------------|-------------|-------------------------|--|---------------|----------|-------------|---------|----------|
| | | | | from Sep 23 | 3 2018 | FC | DRM | 460 | |
| | | | | through Oct 2 | 2018 | Page _ | <u>9</u> of | 21 | |
| NAME OF FILER | | | | administrativos appliedes de approprieta de la constantina de la constantina de la constantina de la constanti | | I.D. NUI | MBER | | 1 |
| Tim Flynn fo | or Mayor 2018 | | | | | 131119 | 91 | | |
| - ATE | | CONTRIBUTOR | IF AN INDIVIDUAL, ENTER | AMOUNT | CUMULATIVE TO | DATE | PER E | LECTION | equitor. |

| 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) |
|------------------|--|--------------------------------------|--|-----------------------------------|---|--|
| 9/30/2018 | Catalina Serros 2651 Bellerive Dr Oxnard CA 93036 | ☑IND □COM □OTH □PTY □SCC | retired | 250 | 250 | 250 |
| 9/30/2018 | Maria C Ramirez/Roy Prince 631 Ivywood Dr Oxnard CA 93030 | ☑IND □COM □OTH □PTY □SCC | self-employed attorney | 100 | 250 | 250 |
| 9/30/2018 | Ralph Scherer 200 S F St Oxnard CA 93030 | IND COM OTH PTY SCC | self-employed television studio worker | 100 | 100 | 100 |
| 9/30/2018 | Gail Sloan 4501 Costa de Oro Oxnard CA 93035 | IND COM OTH PTY SCC | psychologist Gail Sloan Addiction Treatment Centers | 100 | 100 | 100 |
| 9/30/2018 | D & S Rydberg Daniel & Susan 278 Sycamore St Oxnard CA | | self-employed engineer | 70 | 120 | 70 |
| | | | SUBTOTAL \$ | 5 550 | | |

*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 may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

Sep 23 2018

| | | | | through Oct 2 | 20 2018 | | 10 of 21 | | |
|------------------|--|---|--|--|------------|---|----------|--|-----|
| NAME OF FILER | or Mayor 2018 | | | Microsoft of the contract also and a second a | | I.D. NU | | | |
| THE CHYPTER | of Mayor 2016 | | | | | 13111 | 91 | | |
| 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 | CALENDAR Y | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) (IF | | | |
| 9/30/2018 | Ray Tafoya 234 Ashton St Oxnard CA 93033 | ☑IND □COM □OTH □PTY □SCC | Information Specialist Department of Defense | 140 | 140 | | 140 | | 140 |
| 9/30/2018 | Keith Valle 3186 Camino de Debesa Camarillo CA 93010 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Contractor Keith Valle Electric | 100 | 1 | 00 | 100 | | |
| 9/30/2018 | James Williams 3101 Merced Pl Oxnard CA 93033 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 100 | 1 | 00 | 100 | | |
| 9/30/2018 | Hisako Owen-Wilson & Charles Wilson 2701 Wood Opal Way Oxnard CA 93030 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 500 | 10 | 00 | 500 | | |
| 10/2/2018 | Homer Valle 420 Ivywood Dr Oxnard CA 93030 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 250 | 2 | 50 | 250 | | |

SUBTOTAL \$

1090

*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 may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 460

Statement covers period

| | | | | from Sep 2: | 3 2018 | FO | RM 400 | | | | |
|------------------|---|--|--|--|--|----------|--|--|-----|--|-----|
| | | | | through Oct | 20 218 | Page | 11 of 21 | | | | |
| NAME OF FILER | | CONTRACTOR OF AN ANTICAL CONTRACTOR OF THE PROPERTY OF THE PRO | olikinin kurun vaan mulain eriin muonia mii erronia aan muu aanaa sin midika arene aliikatii makeeli vasi midi Tara | versioning to the contract consequence and contract contr | | I.D. NUM | IBER | | | | |
| Tim Flynn fo | or Mayor 2018 | | | | | 131119 | 11 | | | | |
| 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 CALENDAR YE (JAN. 1 - DEC. | AR | PER ELECTION TO DATE (IF REQUIRED) | | | | |
| 10/3/2018 | Glen Aalbers & Associates 2362 N Oxnard BI Ste 201 Oxnard CA 93036 | □IND □COM ØOTH □PTY □SCC | | 250 | 250 | | 250 | | 250 | | 250 |
| 10/3/2018 | Rene Gail Aiu 3352 Ocean Dr Oxnard CA 93035 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 500 | 50 | 00 | 500 | | | | |
| 10/3/2018 | Judith Dugan 4037 Sunset Ln Oxnard CA 93035 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 150 | 40 | 00 | 250 | | | | |
| 10/3/2018 | Mildred Miele 3107 Harbor Bl Oxnard CA 93035 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 50 | 10 | 00 | 150 | | | | |
| 10/5/2018 | T Dean Kato 3560 Dallas Drive Oxnard CA 93033 | | director of sales & marketing Pacific Electric Solar | 100 | 10 | 0 | 100 | | | | |

SUBTOTAL \$

1000

*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 A (Continuation Sheet)

Amounts may be rounded

SCHEDULE A (CONT.)

| Monetary Contributions Received | | to whole d | lollars. | Statement cov | ers period 3 2018 | CALIFO FOR | PRNIA 460 |
|---------------------------------|--|---|-------------------------|--|--|---------------|--------------|
| | | | | through Oct | 2018 | Page 1 | 2 of21 |
| NAME OF FILER | | *************************************** | | Кин (7—14-да) Байнан колоний от открытий подорожной продости и подорожной подорожной подорожной подорожной под | programme and a company of the compa | I.D. NUMBI | ER |
| Tim Flynn fo | or Mayor 2018 | | | | ÷ | 1311191 | |
| DATE | ELILI NAME CEDELE ADDDECC AND ZID CODE OF CONTRIBUTO | CONTRIBUTOR | IF AN INDIVIDUAL, ENTER | AMOUNT | CUMULATIVE TO | DODATE | PER ELECTION |

| | | | | | 10111 | 0 1 |
|------------------|--|---|--|-----------------------------------|---|--|
| 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) |
| 10/7/2018 | Karen Martia 135 N F St Oxnard CA 93030 | ☑IND □COM □OTH □PTY □SCC | retired | 100 | 100 | 100 |
| 10/8/2018 | Diane Delaney 2045 San Sebastian Dr Oxnard CA 93035 | ☑IND □COM □OTH □PTY □SCC | Real Estate Agent REMax/Gold Coast | 250 | 550 | 250 |
| 10/9/2018 | Francine Hecht Flynn 3346 Chiswick Ct Bldg. 58 Apt. 2B Silver Spring MD 20906 | IND COM OTH PTY | retired | 100 | 100 | 100 |
| 10/9/2018 | Ken Minkel 334 Court Av Ventura CA 93003 | ☑IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | residential mortgage consultant Coast Mortgage | 100 | 100 | 100 |
| 10/15/2018 | Al Clemens 5540 W Fifth St #32 Oxnard CA 93035 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 100 | 200 | 100 |
| | | | SUBTOTAL S | 650 | | |

*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 may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 160

Statement covers period

| | | | | from Sep 23 | 3 2018 | F (| JRM 100 | | |
|------------------|---|---|--|-----------------------------------|--|---------|--|--|-----|
| | | | | through Oct 2 | 2018 | Page _ | | | |
| NAME OF FILER | | | | | ' | I.D. NU | MBER | | |
| Tim Flynn fo | or Mayor 2018 | | | | | 19111 | 31 | | |
| 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 CALENDAR YI (JAN. 1 - DEC. | EAR | PER ELECTION TO DATE (IF REQUIRED) | | |
| 10/15/2018 | Audrey & Werner Keller 4420 Chesapeake Dr Oxnard CA 93035 | ☑IND □COM □OTH □PTY □SCC | Owners Keller Partners | 500 | 750 | | 250 | | |
| 10/16/2018 | Joseph O'Neill 510 Palm Dr Oxnard CA 93030 | IND COM OTH PTY | self-employed attorney | 100 | 200 | | 200 | | 100 |
| 10/18/2018 | Robert & Esther Herrera 632 Carty Dr Oxnard CA 93030 | IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Owners Bob & Esther Herrera Real Estate Properties | 300 | 31 | 00 | 300 | | |
| 10/18/2018 | Helen Gunderson 3477 Fairmont Dr Ventura CA 93003 | IND COM OTH PTY SCC | Case Mgr Community Memorial Hospital | 200 | 20 | 00 | 200 | | |
| 10/19/2018 | Robert & Judy Quinn 661 Ivywood Dr Oxnard CA 93030 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 50 | 10 | 00 | 50 | | |

SUBTOTAL \$

1100

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

Sep 23 2018

| | | | | through <u>Oct 202018</u> | | | 14 of 21 | |
|-----------------------------|--|---|--|-----------------------------------|--|------------------------|--|--|
| NAME OF FILER Tim Flynn fo | or Mayor 2018 | | | | | I.D. NUMBER 1311191 | | |
| 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 CALENDAR YI (JAN. 1 - DEC. | EAR | PER ELECTION TO DATE (IF REQUIRED) | |
| 10/20/2018 | Grace Nishihara 1810 Narrows Ct Oxnard CA 93035 | ☑ IND □ COM □ OTH □ PTY □ SCC | retired | 100 | 400 | | 300 | |
| 10/1/2018 | Harold Stewart 1705 Dunsmuir St Oxnard CA 93035 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | retired | 50 | 100 | | 50 | |
| 9/28/2018 | Timothy & Leslie Wawrzeniak 3600 Harbor BI #112 Oxnard CA 93035 | ☑IND □COM □OTH □PTY □SCC | retired | 50 | 150 | | 50 | |
| 9/28/2018 | Angela M Slaff 5131 Wavecrest Wy Oxnard CA 93035 | ☑IND □COM □OTH □PTY □SCC | retired | 50 | 150 | | 50 | |
| 10/7/2018 | Rogelio Santos 3941 Terrace Dr Oxnard CA 93033 | ☑IND □COM □OTH □PTY □SCC | retired | 50 | 10 | 00 | 50 | |
| SUBTOTAL\$ 100 | | | | | | | | |

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party

| Schedule A (Continuation Sheet) Monetary Contributions Received | | Amounts may to whole | | 11 VIII announcementaria | ers period 3 2018 202018 | SCHEDULE A (CALIFORNIA FORM Page 15 of 21 | | |
|---|---|---|--|-----------------------------------|--|---|--|--|
| NAME OF FILER | | kanido mel varanna di nebela ye dalah kenebi melyinin dalah samuala dap halaban zari, | | | | I.D. NU | | |
| Tim Flynn fo | or Mayor 2018 | | | | | 13111 | 91 | |
| 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 CALENDAR Y (JAN. 1 - DEC | /EAR | PER ELECTION TO DATE (IF REQUIRED) | |
| 10/17/2018 | Kim Hocking 1220 Joliet PI Oxnard CA 93030 | IND COM OTH PTY SCC | retired | 100 | 100 | | 10 | |
| | | □IND □COM □OTH □PTY □SCC | | | | | | |
| | | □IND □COM □OTH □PTY □SCC | | | | | | |

SUBTOTAL \$

100

□IND □COM □OTH □PTY

SCC COM OTH PTY scc

*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 B – Part 1 Loans Received | Am | ounts may be ro to whole dollars | | | Statement cov | ers period 3 2018 | FORM | | | | | |
|---|--|---|--|--|----------------------|--|--------------------------------------|---|--|--|--|--|
| SEE INSTRUCTIONS ON REVERSE | | | | | through Oct | 202018 | Page16 | of | | | | |
| NAME OF FILER Tim Flynn for Mayor 2018 | | | | | | | 1.D. NUMBER 1311191 | | | | | |
| 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 | CLOSE OF THIS | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (9) CUMULATIVE CONTRIBUTIONS TO DATE | | | | |
| Гіm Flynn 211 N F St Oxnard CA 93030 | | | | PAID \$ 0 FORGIVEN | \$ 3000 | O % | \$ 3000 | \$ 3000 PER ELECTION** | | | | |
| ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | \$3000 | \$ <u>0</u> | s <u> </u> | 12/31/18 DATE DUE | \$0 | 2/21/18 DATE INCURRED | \$ | | | | |
| IND □ COM □ OTH □ PTY □ SCC | | \$ | s0 | PAID \$ 0 FORGIVEN \$ 0 | \$DATE DUE | % RATE | \$ | \$ PER ELECTION** | | | | |
| | | | | PAID \$ FORGIVEN | \$ | % RATE | \$ | CALENDAR YEAR \$ PER ELECTION** | | | | |

SUBTOTALS \$

0\$

Schedule B Summary

☐ COM ☐ OTH ☐ PTY ☐ SCC

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

0

DATE DUE

(May be a negative number)

3000 \$

0 \$

| 1. | Loans received this period | \$ | |
|----|--|----|---------|
| 2. | Loans paid or forgiven this period | \$ | |
| 3. | Net change this period. (Subtract Line 2 from Line 1.) | 5 | 0 |

†Contributor Codes

DATE INCURRED

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.

Enter the net here and on the Summary Page, Column A, Line 2.

| Schedu | le C | | Amounts may be rounded | | | | | | SCHEDULE |
|------------------|--|--|---|---|--|---------------------------------|-------------------------------------|---------------|--|
| Nonmor | netary Contributions Received | | to whole dollars. | | St | atement covers p | period | CALIF | ORNIA 460 |
| | | | | | from . | Sep 23 20 |)18 | FOI | RM TO |
| | TIONS ON REVERSE | | | | throu | gh Oct 2 0 2 | 2018 | Page | 17_ of _21_ |
| NAME OF FILE | R | | | | | | | I.D. NUMB | ER |
| Tim Flynr | for Mayor 2018 | | | | | | | 131119 | 1 |
| 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 GOODS OR SERV | | AMOUNT/ FAIR MARKET VALUE | CUMULA DA CALENDA (JAN 1 - | TE AR YEAR | PER ELECTION TO DATE (IF REQUIRED) |
| 9/30/2018 | Dominick's Italian Restaurant 477 N Oxnard BI Oxnard CA 93030 | □IND □COM □OTH □PTY □SCC | | bread/salad fo Farm Park fundraiser | | | 595.00 | | |
| 9/23-10/22 | John Flynn 234 N L St Oxnard CA 93030 | ☑IND □COM □OTH □PTY □SCC | | food for volunteers/too | ols | 291.31 | | 291.31 | |
| | | □IND □COM □OTH □PTY □SCC | | | | | | | |
| | | □IND □COM □OTH □PTY □SCC | | | | | | | |
| Attach add | litional information on appropriately labeled | continuation s | sheets. | SUBTO | TAL \$ | 886.31 | | | |
| | | ************************************** | | | Section Control Section Contro | | | | Singapanangi Militarani and inandigi menghada ang di Militar di Andrian di Andrian di Andrian di Andrian di An |

Schedule C Summary

| 1. | . Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) | \$ 886.31 |
|----|--|--------------|
| | . Amount received this period – unitemized nonmonetary contributions of less than \$100 | |
| 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 \$___

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

886.31

| Schedule E Payments Made | Amounts may be rounded to whole dollars. | | | | Statement covers period Sep 23 2018 | | CALIFORNIA 460 | |
|---|--|--|---|---|--|--|----------------|--|
| | | | | from | | | 10 01 | |
| SEE INSTRUCTIONS ON REVERSE | | | | through. | Oct 202018 | Page | | |
| NAME OF FILER | economical environmental incremental instruments of the contract of the contra | engadopendiji saladiri bendari kili bili bili da bili 1940 ili 1940 ili 1940 ili 1940 ili 1940 ili 1940 ili 19 | | | | I.D. NUME | | |
| Tim Flynn for Mayor 2018 | | | | | | 1311191 | | |
| CODES: If one of the following codes accurately describes 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 campaign literature and mailings | MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and si POS postage, deli | munication: I appearances ating urvey resea | ees | RAD radi RFD retu SAL cam TEL t.v. c TRC can TRS staff TSF tran VOT vote | cribe the payment. In airtime and production of the contributions of the contributions of the contributions of the contributions of the contribution of the contribut | iction costs meals nd meals of the same | | |
| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | | CODE | OR DE | ESCRIPTION OF | PAYMENT | | AMOUNT PAID | |
| Costco 2001 E Ventura BI Oxnard CA 93030 | | FND | | | | | 602.73 | |
| SmartNFinal 2021 N Oxnard BI Oxnard CA 93036 | | FND | | | | | 120.17 | |
| Duane Bell's Band 3678 Dry Creek Ln Oxnard CA 93036 | | FND | | | | | 275.00 | |
| * Payments that are contributions or independent expenditures must also b | e summarized on Scho | dule D. | | usakapangamusudaki sebeserren kananan k | SU | BTOTAL \$ | 997.90 | |
| Schedule E Summary | et gefore de la companya de la comp La companya de la co | | от се под при | остория в под при | acerbaticity y provincianing to the public and an accordance to refer to the purple of the form in the Still a Additional Still and Add | en de la companya de | | |
| 1. Itemized payments made this period. (Include all Schedul | e E subtotals.) | | | ###################################### | ************************ | \$ | 9491.48 | |
| 2. Unitemized payments made this period of under \$100 | | | | | | \$ | 951.66 | |
| 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 Sum | mary Page, Colum | n A, Line 6.) | То | TAL \$_ | 10443.14 | |

SCHEDULE E

| Schedule | E | |
|-----------------|------|--------|
| (Continua | tion | Sheet) |
| Payments | Mag | de |

Amounts may be rounded to whole dollars.

| | GOTTEDOLL E (OONT) |
|-------------------------|--------------------|
| Statement covers period | CALIFORNIA 460 |
| fromSep 23 2018 | FORM TO U |
| through Oct 20 2018 | Page 19 of 21 |
| | I.D. NUMBER |
| | 1311191 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Tim Flynn for Mayor 2018

| CNS campalgn 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 campalgn literature and mailings NO CT C | MBR member com MTG meetings and DFC office expens PET petition circul PHO phone banks POL polling and so POS postage, deliv | munications I appearance es ating urvey resea | es | RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production cos TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals | ne candidate/sponsor e-mall) |
|--|---|---|---|--|---------------------------------|
| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
| B&B Services 2401 Eastman Av Ste 25 Oxnard CA 93030 | | LIT | | | 3687.51 |
| NationBuilder 520 S Grand Av Los Angeles CA 90071 | | WEB | | | 228.00 |
| Red Tandem Brewery 1009 Harbor Bl Oxnard CA 93035 | | FND | | | 425.00 |
| Fausset Printing 1799 Eastman Av Ventura CA 93003 | | LIT | | | 2003.07 |
| Santa Clara Elementary 324 S E St Oxnard CA 93030 | · | cvc | | | 150.00 |
| * Payments that are contributions or independent expenditures must also be su | ummarized on Sch | dule D. | ere generature die generation (des volumentes des ausstrations de projecte de projecte de projecte de projecte La managen in annual de projecte de p | SUBTOTA | L\$ 6493.58 |

Schedule E (Continuation Sheet) Payments Made

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

| | SOULTDOLL F (COMI) |
|---|--------------------|
| Statement covers period | CALIFORNIA 460 |
| from Sep 23 2018 | FORM FTOO |
| through Oct 202018 | Page of |
| N. C. | I.D. NUMBER |
| | 1311191 |

NAME OF FILER Tim Flynn for Mayor 2018 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions CNS campaign consultants MTG meetings and appearances SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations candidate travel, lodging, and meals TRC FIL candidate filing/ballot fees PHO phone banks TRS staff/spouse travel, lodging, and meals POL polling and survey research FND fundraising events transfer between committees of the same candidate/sponsor postage, delivery and messenger services TSF IND independent expenditure supporting/opposing others (explain)* VOT voter registration LEG legal defense PRO professional services (legal, accounting) WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings NAME AND ADDRESS OF PAYEE AMOUNT PAID DESCRIPTION OF PAYMENT CODE OR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Oxnard Historic Farm Park Foundation 961 N Rice Av Ste 1A 1200.00 FND Oxnard CA 93030 Tony Pinilla 2816 Rice Road 800,00 CMP Oxnard CA 93030

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

2000

SUBTOTAL \$

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. | Statement covers period from Sep 23 2018 | CALIFORNIA 460 | |
|---|---|--|--|-------------------------------|--|
| SEE INSTRUCTIONS ON REV | VERSE | | through Oct 202018 | Page of | |
| SEE INSTRUCTIONS ON REVIAME OF FILER | | | | I.D. NUMBER | |
| Tim Flynn for Mayor | 2018 | | | 1311191 | |
| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | | DESCRIPTION OF RECEIPT | AMOUNT OF INCREASE TO CASH | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Attach additional in | formation on appropriately labeled continuation sheets. | | SUBTOTA | . \$ | |
| Schedule I Sum | <u> </u> | | | 0 | |
| | s to cash this period | | | Times | |
| 2. Unitemized increa | 0 | | | | |
| 3. Total of all interes | t received this period on loans made to others. (Sch | nedule H, Column (e).) | \$ | U | |
| 4. Total miscellaneo | us increases to cash this period. (Add Lines 1, 2, ar | nd 3. Enter here and on the | TOTAL \$62.1 | 8 | |