

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Oxnard 2020 Coalition		Date of This Filing 10/19/2020	Report No. 201019.2	Date Stamp 2020 OCT 19 PM 3:48 Oxnard City Clerk	CALIFORNIA FORM 496
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1403750				
STREET ADDRESS Redacted		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>		For Official Use Only	
CITY Oxnard	STATE CA	ZIP CODE 93036	No. of Pages 1		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	Measure L, Expansion of duties of elected City Treasurer			
				BALLOT NO./LETTER L	JURISDICTION City of Oxnard	SUPPORT	OPPOSE X

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/19/2020	Literature mailing Cumulative to date total \$3071.90	1,734.40

Reason for Amendment: _____