Statement of Organiza Recipient Committee	Ownerd City Clark		Date Stamp	CALIFO FOR	
Statement Type Initial	☐ Amendment ☑ Term	nination - See Part 5 RECEIVE	ED AND FILED)	or Official Use Only
O Not yet o		in the office of	f the Secretary of Stat State of California	е	
or	2017 AUG 10 FII 2. 336	30 . 19			
Date qua		of termination	6 0 8 2019		V
8/	9 / 18				
1. Committee Information	n I.D. Number (if applicable) 1409260	2. Treasurer and Other I	Principal Officers		
NAME OF COMMITTEE	100 ANT (120 ANT)	NAME OF TREASURER	Managhra 1 ann aige an 12 an 13 an 13 an 14 an 15		
Bert Perello for Oxnard City Council - District 1 (2018)		Bert E. Perello			
		STREET ADDRESS (NO P.O. BOX)			
		2391 Redwing Lane			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
2391 Redwing Lane		Oxnard	CA	93036	(805) 240-6194
CITY	STATE ZIP CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY			
Oxnard	CA 93036 (805) 240-6194				
MAILING ADDRESS (IF DIFFERENT)		STREET ADDRESS (NO P.O. BOX)			
Same					
e-MAIL ADDRESS (REQUIRED) / FAX (OPTION perello.bert@gmail.com	NAL)	CITY	STATE	ZIP CODE	AREA CODE/PHONE
COUNTY OF DOMICILE	JURISDICTION WHERE COMMITTEE IS ACTIVE	NAME OF PRINCIPAL OFFICER(S)			
Ventura	City of Oxnard				
		STREET ADDRESS (NO P.O. BOX)			
Attach additional information	on appropriately labeled continuation sheets.	СІТУ	STATE	ZIP CODE	AREA CODE/PHONE
	By Derb & Perello SIGNATURE OF CONTROLLING		OPONENT	and comple	te. I certify under
Executed on	By				
DATE		IG OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PE	ROPONENT		

FPPC Form 410 (February/2018)
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