

# 497 Contribution Report

Amounts may be rounded to whole dollars.

SAN BUENA VENTURA  
CITY CLERK

<b>NAME OF FILER</b> <b>ED ALAMILLO FOR COUNCIL 2018</b>		<b>Date of This Filing</b> <u>10/07/2018</u>	<b>Date Stamp</b> 18 OCT -8	CALIFORNIA <b>497</b> FORM For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (805)766-9171	<b>I.D. NUMBER (if applicable)</b> 1408564	<b>Report No.</b> <u>1</u>	<i>Received via email 10/8/18 8:19am Amar</i>	
<b>STREET ADDRESS</b> [REDACTED]		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> [REDACTED] <b>STATE</b> [REDACTED] <b>ZIP CODE</b> [REDACTED]		<b>No. of Pages</b> <u>2</u>		

## 1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
07/31/2018	ED ALAMILLO [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COUNTY OF VENTURA ENVIRONMENTAL HEALTH TECH 800 S. VICTORIA AVE. VENTURA, CA 93009	50  <input checked="" type="checkbox"/> Check if Loan <u>0</u> % <small>Provide interest rate</small>
08/01/2018	ED ALAMILLO [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COUNTY OF VENTURA ENVIRONMENTAL HEALTH TECH 800 S. VICTORIA AVE. VENTURA, CA 93009	825  <input checked="" type="checkbox"/> Check if Loan <u>0</u> % <small>Provide interest rate</small>
08/02/2018	ED ALAMILLO [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COUNTY OF VENTURA ENVIRONMENTAL HEALTH TECH 800 S. VICTORIA AVE. VENTURA, CA 93009	295  <input checked="" type="checkbox"/> Check if Loan <u>0</u> % <small>Provide interest rate</small>

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

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<b>NAME OF FILER</b> ED ALAMILLO FOR COUNCIL 2018		<b>Date of This Filing</b> 10/07/2018	<b>Date Stamp</b> OCT 18 19:56	<b>CALIFORNIA FORM 497</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (805)766-9171	<b>I.D. NUMBER (if applicable)</b> 1408564	<b>Report No.</b> 1	<i>received via email 10/8/18 8:19 am adranr</i>	
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08/03/2018	ED ALAMILLO [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COUNTY OF VENTURA ENVIRONMENTAL HEALTH TECH 800 S. VICTORIA AVE. VENTURA, CA 93009	40 <input checked="" type="checkbox"/> Check if Loan 0 % <small>Provide interest rate</small>
08/15/2018	ED ALAMILLO [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COUNTY OF VENTURA ENVIRONMENTAL HEALTH TECH 800 S. VICTORIA AVE. VENTURA, CA 93009	42 <input checked="" type="checkbox"/> Check if Loan 0 % <small>Provide interest rate</small>
09/21/2018	ED ALAMILLO [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COUNTY OF VENTURA ENVIRONMENTAL HEALTH TECH 800 S. VICTORIA AVE. VENTURA, CA 93009	34 <input checked="" type="checkbox"/> Check if Loan 0 % <small>Provide interest rate</small>

Reason for Amendment: \_\_\_\_\_

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