

# 497 Contribution Report

Amounts may be rounded to whole dollars.

SAN BUENA VENTURA  
CITY CLERK

NAME OF FILER <b>Committee for a Better Ventura - Yes on Measure O</b>		Date of This Filing <u>11/8/16</u>	Date Stamp <b>'16 NOV -8 A1</b> <i>Alman</i>	CALIFORNIA FORM <b>497</b> For Official Use Only
AREA CODE/PHONE NUMBER <b>(805) 302-1600</b>	I.D. NUMBER (if applicable)	Report No. <u>17</u>		
STREET ADDRESS [REDACTED]		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY <b>Ventura,</b>	STATE <b>CA</b>	ZIP CODE <b>93002</b>	No. of Pages <u>1</u>	

## 1. Contribution(s) Received

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
11/7/16	<b>James Dearkland</b> [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<b>Real Estate Investor, OFI Management</b>	<b>2500</b> <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

**\*\*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

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