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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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2023 FEB -6 AM 11: 58

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	AME OF DMMITTEE (in full)	TYPE OR PRINT ▼	Example: If ty over the lines		12FE4M5	
$[G_l r_l]$	e _i a _i t _i e _i r _{i i} O _i x _i	n _ı a _ı r _ı d _{ı ı} 0 _ı r _ı g _ı a	$n_i i_i z_i a_i t_i i_i c$	$p_1 n_1 p_1 f_1$	Democr	_i a _i t _i s, , , , ,
ADDRE	ESS (number and street)	P_1O_1 $B_1O_1x_1$ 6	6,4,5, , , ,	1.		
ň	Check if different than previously					
	reported. (ACC)	O ₁ x ₁ n ₁ a ₁ r ₁ d ₁			[C ₁ A] [9 ₁ 3	0,3,1-
2. FE	EC IDENTIFICATION N	UMBER ▼	CITY A		STATE A	ZIP CODE A
	0 0 4 2 8 3	7.5	IS THIS REPORT	NEW. (N) OR	AMENDI (A)	ED
	PE OF REPORT	(b) Monthly F	eb 20 (M2)	May 20 (M5)	Aug 20 (M	(Non-Election
(a)		Due On: N	lar 20 (M3)	Jun 20 (M6)	Sep 20 (M	Year Only) Dec 20 (M12) (Non-Election Year Only)
!	April 15		pr 20 (M4)	Jul 20 (M7)	Oct 20 (M	programme and the second
!	Quarterly Report (i	(C) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
1	Ouarterly Report (October 15	Report for the	Convention	n (12C)	Special (12S)	
!	Ouarterly Report (January 31 Year-End Report (ation on	08.	2022	in the CA
	July 31 Mid-Year Report (Non-election	(d) 30-Day				
	Year Only) (MY) Termination Repor	POST-Election Report for the	General (30G)	Runoff (30R)	Special (30S)
	(TER)		ction on	/ [] / [in the State of
5. Co	overing Period	0" '01 <u>2</u> 0	ŽŽ throug	h 10	19 2	0.2.2
I certify	that I have examined t	his Report and to the best	of my knowledge ar	nd belief it is tru	e, correct and com	plete.
Type o	r Print Name of Treasure	er Veronica Miranda				
Signatu	re of Treasurer	Germica/4	iranda	D	ate 01	⁶ 2 9
NOTE.	Submission of false, error	neous, or incomplete informa	tion may subject the p	person signing th	is Report to the per	nalties of 52 U.S.C. § 30109.
1	Office Use				F	EC FORM 3X Rev. 05/2016

NOUNT DN : OG : OM : OOMMONTS

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Report Covering the Period From: COLUMN A **COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at 5_5_3_1_9 Beginning of Reporting Period. (c) Total Receipts (from Line 19)...... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... Total Disbursements (from Line 31)..... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

NONM : ON : OB : OM : ODAMBENG

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

. Write or Type Committee Name

<u>G</u>	reater Oxnard Organization of Democrats		
R	eport Covering the Period. From.	' 0 1 ' 2 0 2 2 T	o 1 0 ' 1 9 ' 2 0 2 2
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From		
	(a) Individuals/Persons Other		
	Than Political Committees		
	(ı) Itemized (use Schedule A)	2.0.0_0.0	2,7,0,0,0,0
	(iv) Hartamizad	38203	15000
	(ii) Unitemized (iii) TOTAL (add		1, 5, 0, 0, 0
	Lines 11(a)(i) and (ii)	5 8 2 0 3	3 2 3 2 0 3
	Lines Tr(a)(i) and (ii)		
	(b) Political Party Committees		A 570 A 530 A 57
	(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		0,0000
	Totals to Line 33, page 5),▶	<u> </u>	3,23,203
12.	Transfers From Affiliated/Other		
	Party Committees		- 57 - 57 - 57 - 57 - 57 - 57 - 57 - 57
13.	All Loans Received		
	Loan Repayments Received		
15.	Offsets To Operating Expenditures	r	
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)		
16.	Refunds of Contributions Made		
	to Federal Candidates and Other		
477	Political Committees		
17.	Other Federal Receipts		
18-	(Dividends, Interest, etc.)		
10.	(a) Non-Federal Account		
	(from Schedule H3)	·	
	(57 4 57
	(b) Levin Funds (from Schedule H5)		
	(b) Leviii 1 dilus (iloiii Scheddle 115)		
	(c) Total Transfers (add 18(a) and 18(b))		
	(6) 16(4) (1416)618 (488 16(4) 4118 16(8))		
•	•		
19.	Total Receipts (add Lines 11(d);		
	12, 13, 14, 15, 16, 17, and 18(c))▶		3_2.3.2.0.3
	•		
20.	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)▶	5,8,2,0,3	3,2,3,2,0,3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Time Teriod	Calendar Tear-to-Date
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating		
Expenditures	8.9.4.26	3,6,5,4,5,9
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))	8.9.4.2.6	3,654,59
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to		
Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures		
(use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d))		
(use Schedule F)		
26. Loan Repayments Made		3 475 0 3 675 4 4 655
O7 Longo Modo		
27. Loans Made		4 4 573 B 1 573 B 4 573 B
(a) Individuals/Persons Other Than Political Committees		
That I omidal Committees		7 1 7
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)		,
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))		
,		473 4 4
29. Other Disbursements (Including		
Non-Federal Donations)		414
30. Federal Election Activity (52 U.S.C. § 3010	11(20))	
(a) Allocated Federal Election Activity	,,(20),	•
(from Schedule H6)		
(i) Federal Share		
(iı) "Levin" Share		
(b) Federal Election Activity Paid		
Entirely With Federal Funds		
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))		
A. T. I B. I		
31. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d). 29 and 30(c))	8.9.4.2.6	3.6.5.4.5.9
32. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	8.9.4.2.6	3,6,5,4,5,9
·		
		•

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 5 COLUMN A III. Net Contributions/ COLUMN B **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)).... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36)

										•					
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the		FOR LINE NUMBER PAGE OF (check only one)										
TEMIZED RECEIPTS			Detailed Summary Page		11a		11b	11c	F	12 16	Г.	7			
	y information copied from such Reports and S for commercial purposes, other than using the				for the		pose o	solicitii		ntributi	ions	17			
K.	NAME OF COMMITTEE (In Full)	name and a	address of any pointed committee	56 10 3	Olicit CO	of Figure	Julions	110111 30	CH CC	211111111111111111111111111111111111111		_			
	Greater Oxnard Organization	of Dem	ocrats	-											
Α.	Full Name of Individual (Last, First, Middle Init Gary Herrera	tial) or Full O	organization Name		Date o	of Re	eceipt								
	Mailing Address 5012 Sealane Way	•					1.0 / 1.7 / 2.0 2 2								
	Oxnard	State CA	Zip Code 93035		Amoun	nt of	Each f	Receipt	this F	Period		·			
	FEC ID number of contributing federal political committee.	С					92	77.	2,0	0	0,0				
Name of Employer (for Individual) Retired		Re		^	lemo	o Item									
	Receipt For:	Aggregate	Year-to-Date ▼								,				
	Primary General Other (specify) ▼		200.00												
В.	Full Name of Individual (Last, First, Middle Init	tial) or Full O	Organization Name		Date o	of Re	eceipt								
	Mailing Address				M N	7			γ = γ	***					
	City	State	Zip Code		Amour	nt of	Each !	Receipt	this f	Period					
	FEC ID number of contributing federal political committee.	C		-			-772	- 17.		7					
	Name of Employer (for Individual)	Осс	cupation (for Individual)		^	1em	o Item								
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		<u> </u>												
C-	Full Name of Individual (Last, First, Middle Ini	tial) or Full C	=		Date o	of Re	eceipt _			-					
	Mailing Address]		"	7 . 7						
	City	State	Zip Code		Amour	nt of	Each 1	Receipt	this f	Period					
	FEC ID number of contributing federal political committee.							- J							
•	Name of Employer (for Individual)	Occ	cupation (for Individual)		_ \	/lem	o Item								
	Receipt For Primary General Other (specify)	Aggregate	Year-to-Date ▼]											

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only)......

2,0,0

ITEMIZED DISBURSEMENTS	Use separate schedule(state for each category of the Detailed Summary Page	216	y one)232627			
Any information copied from such Reports and Statem		28a	28b 28c 29 30b on for the purpose of soliciting contributions			
or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
Greater Oxnard Organization of Democra	ats					
Full Name (Last, First, Middle Initial)	Name (Last, First, Middle Initial)					
A. Southern California Edison Company	'		Date of Disbursement			
Mailing Address PO BOX 6109			08 09 2022			
City	State Zip Code		FEC Identification Number			
Covina, C	CA 91722	T				
Purpose of Disbursement Power bill for the office		0 0 1	C 0 0 4 2 9 5 6 3			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:	. ype	2_5 0 0 0 0			
<u> </u>	Primary General					
State District.	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)						
B. USPS			Date of Disbursement			
Mailing Address			10 1 4 2 0 2 2			
1961 N C St	961 N C St					
	State Zip Code CA 93036		FEC Identification Number			
Purpose of Disbursement	ose of Disbursement stage for member mailing 0 0 3					
Postage for member mailing Candidate Name						
Curvione Name						
· H	ght: House Disbursement For:		44 0 0			
├ ┤	Primary General Other (specify)					
State. District			Memo Item			
Full Name (Last, First, Middle Initial)			0 1			
C. USPS			Date of Disbursement			
Mailing Address 1961 N C St			10 1 4 2 0 2 2			
•	State Zip Code		FEC Identification Number			
Oxnard Purpose of Disbursement	CA 93036					
Postage for member mailing	ostage for member mailing 0 0 3					
Candidate Name		Category/	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For.	Туре	1 76 00			
Senate	Primary General					
State. District:	Other (specify) ▼	_	Memo Item			
SUBTOTAL of Disbursements This Page (optional)			1_1.1.5_8.0			
TOTAL This Period (last page this line number only).			1 1 1 5 8 0			

P.O. Box 6645 Oxnard, CA 93031

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Washington, DC 20463 1050 First St., N.E.

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USPS Priority Mail Express	Postmarked				
Postmark Illegible					
No Postmark					
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Next Business D	Day Delivery				
Received from House Records & Registration Office	Date of Receipt				
Received from Senate Public Records Office	Date of Receipt				
Received from Electronic Filing Office	Date of Receipt				
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WDe)	2/6/23				
PREPARER (3/2015)	DATE PREPARED				