

**Date:** July 6, 2016

**To:** County Executive Office, Campaign Finance Staff

**From:** Ventura County Clerk

**Subject: Report #2016-09 of Apparent Violation of the Ventura County Campaign Finance Reform Ordinance (No. 4471)**

In accordance with Section 1304(e) of the Ventura County Campaign Finance Reform Ordinance (No. 4471), the Ventura County Clerk is hereby reporting to the County Executive Office an apparent violation of Section 1286(a) and (c) of Ordinance #4471, by the Martin F. Hernandez for Supervisor 2016 Committee.

Section 1286(a) states:

“On the same dates and in the same manner as required by the Political Reform Act, Article 2 of Chapter 4 of Title 9 of the Government Code (Section 84200 et seq.), County candidates or the controlled committee of such candidates shall disclose each contribution that individually or cumulatively totals \$50 or more per contributor.”

Section 1286(c) states:

“Contributions of goods and services shall be reported at the fair market value of the contribution and covered by the contribution limits of this ordinance.”

**“Martin Hernandez at Sespe Creek” April 29, 2016 YouTube Video**

The following is a link to a YouTube video entitled “Martin Hernandez at Sespe Creek Levee” listed as being published on April 29, 2016:

<https://www.youtube.com/watch?v=uJMdREDQvic>

This video, in addition to a second April 29, 2016 YouTube video entitled “Martin Hernandez visits Camarillo Animal Shelter” (discussed below), were reported to the Ventura County Clerk, on June 30, 2016, by County Supervisor Kathy Long.

A Google search for “Martin Hernandez Ventura County” does not return a link to the “Martin Hernandez at Sespe Creek Levee” video in the first five pages of the results.

Mr. Hernandez appears by himself in this video. At the beginning of the video, the following title in white lettering (except for Sespe Creek Levee which appears in yellow lettering) appears briefly as an overlay:

Martin Hernandez  
visits  
Sespe Creek Levee  
protecting the residents of  
Fillmore

Mr. Hernandez introduces himself at the beginning of the video as “Martin Hernandez, candidate for the third district supervisor.” He states “I would like to tell you a little bit about some of the work I’ve been involved in out here in the community of Fillmore.” He states “It instills my passion for living here, my passion for this district, and continuing to serve you.”

Mr. Hernandez explains the purpose of the video: “What I’m here to talk to you with about and why I’m standing on this incredible levee here along the Sespe Creek is to explain to you some of the work that the Watershed Protection District has been involved in since the early 2000s.”

At the end of the video, Mr. Hernandez states “As your next supervisor for the third district, I’m committed to ensuring the protection of the residents of Fillmore and all those that live along similar levees along the Santa Clara River.”

No credits appear at the end of the video although “KADYTV” and “Bob Allen” are listed under the title of the video.

According to the attached PDFs of California Form 460 (January 1, 2015-June 30, 2015, filed July 31, 2015; July 1, 2015-December 31, 2015, filed June 3, 2016; January 1, 2016-April 23, 2016, filed April 30, 2016; and April 24, 2016-May 21, 2016, filed May 26, 2016), the “Martin Hernandez at Sespe Creek Levee” YouTube video is not reported as a contribution of goods and services at fair market value to the Martin F. Hernandez for Supervisor 2016 Committee. The YouTube video is also not reported as an expenditure of \$100 or more on Schedules E or F of the above California Forms 460.

The Ventura County Clerk has determined that the April 29, 2016 YouTube video entitled “Martin Hernandez at Sespe Creek Levee” is not disclosed on the California Forms 460 filed by the Martin F. Hernandez for Supervisor 2016 Committee, either as an expenditure of \$100 or more, or as a contribution of goods and services at fair market value in the amount of \$50 or more.

As such, the nondisclosure of the “Martin Hernandez at Sespe Creek Levee” YouTube video appears on its face, based on a word-by-word review of the content, to be a violation of Section 1286(a) and (c) of the Ordinance.

### **“Martin Hernandez visits Camarillo Animal Shelter” April 29, 2016 YouTube Video**

The Ventura County Clerk also reviewed the following second YouTube video, as reported to the Clerk on June 30, 2016, entitled “Martin Hernandez visits Camarillo Animal Shelter,” and listed as being published on April 29, 2016:

<https://www.youtube.com/watch?v=brLu8cPXHs>

In this video, Mr. Hernandez interviews Donna Gillespie, Animal Services Department Director. Mr. Hernandez introduces himself at the beginning of the video as “Martin Hernandez” and states “I’m here to just ask some questions and highlight one of the premier programs that we have here at the County.” Later in the video, Mr. Hernandez makes a singular reference to himself as “mayor of Santa Paula” (Mr. Hernandez is the incumbent mayor of Santa Paula) but does not make any direct reference to himself as a candidate for County Supervisor. At the end of the video, Mr. Hernandez asks Ms. Gillespie “If you had a new elected supervisor or what could you do, what would you like to see the supervisors or the County in general support as you move forward, what would you like to have their support in?” Based on a word-by-word review on its face of this second YouTube video, the Ventura County Clerk is unable to determine any factual basis to warrant referring the April 29, 2016 “Martin Hernandez visits Camarillo Animal Shelter” YouTube video to the County Executive Office as an apparent violation of the Ordinance.

Attachments

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

**CALIFORNIA FORM 460**

Page 1 of 3

For Official Use Only

Date Stamp

E-Filed  
07/31/2015  
09:30:51  
Filing ID:  
155541354

**Statement covers period**

from 01/01/2015

through 06/30/2015

**Date of election if applicable:**  
(Month, Day, Year)

06/07/2016

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall  
*(Also Complete Part 5)*
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored  
*(Also Complete Part 6)*
- Primarily Formed Candidate/Officeholder Committee  
*(Also Complete Part 7)*

**2. Type of Statement:**

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
*(Also file a Form 410 Termination)*
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER

1378005

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Martin F. Hernandez for Supervisor 2016

STREET ADDRESS (NO P.O. BOX)

|                    |           |              |                      |
|--------------------|-----------|--------------|----------------------|
| CITY               | STATE     | ZIP CODE     | AREA CODE/PHONE      |
| <u>Santa Paula</u> | <u>CA</u> | <u>93060</u> | <u>(805)390-2077</u> |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS

pcnova54@gmail.com

**Treasurer(s)**

NAME OF TREASURER

Yolanda Miranda

MAILING ADDRESS

|               |           |              |                      |
|---------------|-----------|--------------|----------------------|
| CITY          | STATE     | ZIP CODE     | AREA CODE/PHONE      |
| <u>Covina</u> | <u>CA</u> | <u>91722</u> | <u>(626)915-7635</u> |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/15/2015  
Date

By Yolanda Miranda  
Signature of Treasurer or Assistant Treasurer

Executed on 07/15/2015  
Date

By Martin F. Hernandez  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

Type or print in ink.

COVER PAGE - PART 2

**CALIFORNIA  
FORM 460**

Page 2 of 3

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Martin F. Hernandez

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

County Supervisor: Ventura District 3

| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY        | STATE | ZIP   |
|---|-------------|-------|-------|
|   | Santa Paula | CA    | 93060 |

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

| COMMITTEE NAME                            | I.D. NUMBER |
|---|-------------|
| Martin F. Hernandez for City Council 2012 | 1350169     |

| NAME OF TREASURER | CONTROLLED COMMITTEE?   |
|-------------------|---|
|                   | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |          |                 |
|-------------------|------------------------------|----------|-----------------|
| CITY              | STATE                        | ZIP CODE | AREA CODE/PHONE |
| Santa Paula       | CA                           | 93060    | (805) 390-2077  |

| COMMITTEE NAME | I.D. NUMBER |
|----------------|-------------|
|                |             |

| NAME OF TREASURER | CONTROLLED COMMITTEE?                                    |
|-------------------|--|
|                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |          |                 |
|-------------------|------------------------------|----------|-----------------|
| CITY              | STATE                        | ZIP CODE | AREA CODE/PHONE |
|                   |                              |          |                 |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|----------------------|--------------|---|
|                      |              |   |

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|
|                       |                     |

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|-----------------------------------|-----------------------|---|
|                                   |                       |   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|                                   |                       |   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|                                   |                       |   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|                                   |                       |   |

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|   |                                |
|---|--------------------------------|
| Statement covers period<br>from <u>01/01/2015</u> | <b>CALIFORNIA<br/>FORM 460</b> |
| through <u>06/30/2015</u>                         |                                |
| Page <u>3</u> of <u>3</u>                         | I.D. NUMBER<br><u>1378005</u>  |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

## Contributions Received

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions ..... Schedule A, Line 3    | \$ <u>0.00</u>   | \$ <u>0.00</u>                             |
| 2. Loans Received ..... Schedule B, Line 3            | <u>0.00</u>  | <u>0.00</u>                                |
| 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2  | \$ <u>0.00</u>   | \$ <u>0.00</u>                             |
| 4. Nonmonetary Contributions ..... Schedule C, Line 3 | <u>0.00</u>  | <u>0.00</u>                                |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 | \$ <u>0.00</u>   | \$ <u>0.00</u>                             |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            | 1/1 through 6/30 | 7/1 to Date |
|----------------------------|------------------|-------------|
| 20. Contributions Received | \$ _____         | \$ _____    |
| 21. Expenditures Made      | \$ _____         | \$ _____    |

## Expenditures Made

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 6. Payments Made ..... Schedule E, Line 4                   | \$ <u>0.00</u>   | \$ <u>0.00</u>                             |
| 7. Loans Made ..... Schedule H, Line 3                      | <u>0.00</u>  | <u>0.00</u>                                |
| 8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7             | \$ <u>0.00</u>   | \$ <u>0.00</u>                             |
| 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 | <u>0.00</u>  | <u>0.00</u>                                |
| 10. Nonmonetary Adjustment ..... Schedule C, Line 3         | <u>0.00</u>  | <u>0.00</u>                                |
| 11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10      | \$ <u>0.00</u>   | \$ <u>0.00</u>                             |

## Expenditure Limit Summary for State Candidates

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

| Date of Election<br>(mm/dd/yy)    | Total to Date |
|-----------------------------------|---------------|
| <u>  </u> / <u>  </u> / <u>  </u> | \$ _____      |
| <u>  </u> / <u>  </u> / <u>  </u> | \$ _____      |

## Current Cash Statement

|  |                |
|--|----------------|
| 12. Beginning Cash Balance ..... Previous Summary Page, Line 16                    | \$ <u>0.00</u> |
| 13. Cash Receipts ..... Column A, Line 3 above                                     | <u>0.00</u>    |
| 14. Miscellaneous Increases to Cash ..... Schedule I, Line 4                       | <u>0.00</u>    |
| 15. Cash Payments ..... Column A, Line 8 above                                     | <u>0.00</u>    |
| 16. <b>ENDING CASH BALANCE</b> ..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ <u>0.00</u> |

If this is a termination statement, Line 16 must be zero.

|   |                |
|---|----------------|
| 17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 | \$ <u>0.00</u> |
|---|----------------|

## Cash Equivalents and Outstanding Debts

|   |                |
|---|----------------|
| 18. Cash Equivalents ..... See instructions on reverse            | \$ <u>0.00</u> |
| 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above | \$ <u>0.00</u> |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

CALIFORNIA FORM **460**

Date Stamp

E-Filed  
06/03/2016  
20:46:54

Filing ID:  
160586958

Page 1 of 34

For Official Use Only

### Statement covers period

from 07/01/2015

through 12/31/2015

### Date of election if applicable: (Month, Day, Year)

06/07/2016

SEE INSTRUCTIONS ON REVERSE

## 1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><i>(Also Complete Part 5)</i> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="checkbox"/> Controlled<br><input type="checkbox"/> Sponsored<br><i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee      | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i>  |

## 2. Type of Statement:

- |   |   |
|---|---|
| <input type="checkbox"/> Preelection Statement  | <input type="checkbox"/> Quarterly Statement                                  |
| <input checked="" type="checkbox"/> Semi-annual Statement                                   | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement<br><i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input checked="" type="checkbox"/> Amendment (Explain below)                               |   |

Amending Schedule A to correct a name of contributor.

## 3. Committee Information

I.D. NUMBER

1378005

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Martin F. Hernandez for Supervisor 2016

STREET ADDRESS (NO P.O. BOX)

|                    |           |              |                      |
|--------------------|-----------|--------------|----------------------|
| CITY               | STATE     | ZIP CODE     | AREA CODE/PHONE      |
| <u>Santa Paula</u> | <u>CA</u> | <u>93060</u> | <u>(805)390-2077</u> |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS

pcnova54@gmail.com

## Treasurer(s)

NAME OF TREASURER

Yolanda Miranda

MAILING ADDRESS

|               |           |              |                      |
|---------------|-----------|--------------|----------------------|
| CITY          | STATE     | ZIP CODE     | AREA CODE/PHONE      |
| <u>Covina</u> | <u>CA</u> | <u>91722</u> | <u>(626)915-7635</u> |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS

## 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 06/03/2016  
Date

By Yolanda Miranda  
Signature of Treasurer or Assistant Treasurer

Executed on 06/03/2016  
Date

By Martin F. Hernandez  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Martin F. Hernandez

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

County Supervisor: Ventura District 3

| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY        | STATE | ZIP   |
|---|-------------|-------|-------|
|   | Santa Paula | CA    | 93060 |

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

| COMMITTEE NAME                            | I.D. NUMBER |
|---|-------------|
| Martin F. Hernandez for City Council 2012 | 1350169     |

| NAME OF TREASURER | CONTROLLED COMMITTEE?   |
|-------------------|---|
|                   | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |          |                      |
|-------------------|------------------------------|----------|----------------------|
| CITY              | STATE                        | ZIP CODE | AREA CODE/PHONE      |
|                   | Santa Paula                  | CA       | 93060 (805) 390-2077 |

| COMMITTEE NAME | I.D. NUMBER |
|----------------|-------------|
|                |             |

| NAME OF TREASURER | CONTROLLED COMMITTEE?                                    |
|-------------------|--|
|                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |          |                 |
|-------------------|------------------------------|----------|-----------------|
| CITY              | STATE                        | ZIP CODE | AREA CODE/PHONE |
|                   |                              |          |                 |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|----------------------|--------------|---|
|                      |              |   |

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|
|                       |                     |

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|-----------------------------------|-----------------------|---|
|                                   |                       |   |
|                                   |                       |   |
|                                   |                       |   |
|                                   |                       |   |

*Attach continuation sheets if necessary*



# Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page <u>3</u> of <u>34</u>     |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

## Contributions Received

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions ..... Schedule A, Line 3    | \$ 28,551.00   | \$ 28,551.00                               |
| 2. Loans Received ..... Schedule B, Line 3            | 15,000.00  | 15,000.00                                  |
| 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2  | \$ 43,551.00   | \$ 43,551.00                               |
| 4. Nonmonetary Contributions ..... Schedule C, Line 3 | 572.68   | 572.68                                     |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 | \$ 44,123.68   | \$ 44,123.68                               |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            | 1/1 through 6/30 | 7/1 to Date |
|----------------------------|------------------|-------------|
| 20. Contributions Received | \$ _____         | \$ _____    |
| 21. Expenditures Made      | \$ _____         | \$ _____    |

## Expenditures Made

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 6. Payments Made ..... Schedule E, Line 4                   | \$ 17,811.47   | \$ 17,811.47                               |
| 7. Loans Made ..... Schedule H, Line 3                      | 0.00   | 0.00                                       |
| 8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7             | \$ 17,811.47   | \$ 17,811.47                               |
| 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 | 500.00   | 500.00                                     |
| 10. Nonmonetary Adjustment ..... Schedule C, Line 3         | 572.68   | 572.68                                     |
| 11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10      | \$ 18,884.15   | \$ 18,884.15                               |

## Expenditure Limit Summary for State Candidates

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____                 | \$ _____      |
| ____/____/____                 | \$ _____      |

## Current Cash Statement

|  |              |
|--|--------------|
| 12. Beginning Cash Balance ..... Previous Summary Page, Line 16                    | \$ 0.00      |
| 13. Cash Receipts ..... Column A, Line 3 above                                     | 43,551.00    |
| 14. Miscellaneous Increases to Cash ..... Schedule I, Line 4                       | 0.00         |
| 15. Cash Payments ..... Column A, Line 8 above                                     | 17,811.47    |
| 16. <b>ENDING CASH BALANCE</b> ..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 25,739.53 |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

If this is a termination statement, Line 16 must be zero.

|   |         |
|---|---------|
| 17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 | \$ 0.00 |
|---|---------|

## Cash Equivalents and Outstanding Debts

|   |              |
|---|--------------|
| 18. Cash Equivalents ..... See instructions on reverse            | \$ 0.00      |
| 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above | \$ 15,500.00 |

# Schedule A Monetary Contributions Received

Amounts may be rounded  
to whole dollars.

SCHEDULE A

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 07/01/2015 |                            |
| through                 | 12/31/2015 | Page <u>4</u> of <u>34</u> |

SEE INSTRUCTIONS ON REVERSE

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 11/22/2015         | Julie A. Aragon<br>Oxnard, CA 93036   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Child Care Provider<br>Julie A. Aragon  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 12/21/2015         | Steven Bartels<br>Fillmore, CA 93015  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer / Consultant<br>GreenSource Inc.   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 08/31/2015         | Jose A. Bernard<br>Ventura, CA 93004  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Management Analyst<br>County of Ventura   | 100.00                      | 200.00   | P2016 \$200.00                        |
| 11/22/2015         | Jose A. Bernard<br>Ventura, CA 93004  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Management Analyst<br>County of Ventura   | 100.00                      | 200.00   | P2016 \$200.00                        |
| 11/16/2015         | John W. Blanchard<br>Camarillo, CA 93012-4430   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 150.00                      | 150.00   | P2016 \$150.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 650.00                      |  |                                       |

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 27,050.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 1,501.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 28,551.00

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2015 |                                |
| through                 | 12/31/2015 | Page <u>5</u> of <u>34</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 10/21/2015         | Robert V. Borrego<br>Santa Paula, CA 93060-1711   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 08/26/2015         | Marion Ron Bottorff<br>Newbury Park, CA 91320   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 08/24/2015         | Ellen M. Brokaw<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner<br>Operator Brokaw Nursery  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 08/03/2015         | Frank Brommenschenkel<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Consultant<br>Frank Brommenschenkel   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 08/07/2015         | Jeffery Burgh<br>Ventura, CA 93003  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | County Auditor-Controller<br>County of Ventura  | 250.00                      | 250.00   | P2016 \$250.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,300.00                    |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2015 |                                |
| through                 | 12/31/2015 | Page <u>6</u> of <u>34</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 07/17/2015         | Roberta S. Cohen<br>Los Angeles, CA 90049   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Ranch Owner<br>Roberta S. Cohen   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 09/28/2015         | Cyndie Cole<br>Ventura, CA 93003  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 300.00                      | 300.00   | P2016 \$300.00                        |
| 12/21/2015         | Joan Conahey<br>Camarillo, CA 93010   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 11/22/2015         | Conrad R. Alvarez Consulting<br>Camarillo, CA 93012-7116  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 125.00                      | 125.00   | P2016 \$125.00                        |
| 11/06/2015         | Crimson California Pipeline, LP<br>Denver, CO 80202   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 500.00                      | 500.00   | P2016 \$500.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,775.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page <u>7</u> of <u>34</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/24/2015         | Holly Doering<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Acct. Officer<br>HCA - County of Ventura  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 09/15/2015         | Harold Edwards<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | CEO<br>Limoneira Co.  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 10/13/2015         | Lester G. Egedi<br>Fillmore, CA 93015   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Reporter<br>TheSespeSun.com   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 08/04/2015         | Chris Espinosa<br>Rockville, MD 20853   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Legislative Representative<br>Earthjustice  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 11/22/2015         | Victor M. Espinosa<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 125.00                      | 125.00   | P2016 \$125.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 3,125.00                    |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page <u>8</u> of <u>34</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/01/2015         | Melinda Fernandez<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 12/14/2015         | James P. Finch<br>Ojai, CA 93023  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Rancher<br>James P. Finch   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 10/29/2015         | Clifford G. Finley<br>Santa Paula, CA 93060-1625  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | City Engineer<br>City of Thousand Oaks  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 09/11/2015         | Karen Marie Flock<br>Ventura, CA 93003  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Developer<br>Cabrillo EDC   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 11/22/2015         | Flying 'D' Ranch, LLC<br>Santa Paula, CA 93060  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 300.00                      | 300.00   | P2016 \$300.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,350.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page <u>9</u> of <u>34</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 11/22/2015         | William Gallaher<br>Ventura, CA 93001   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Administrative Aid<br>Ventura County  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 10/31/2015         | Douglas Green<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Management Consultant<br>Douglas Green  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 11/22/2015         | Timothy Hagel<br>Moorpark, CA 93021   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Sheriff Commander<br>Ventura County   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 08/31/2015         | Robert Hargarten<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 11/22/2015         | Herbs Tax Service<br>Oxnard, CA 93030   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 100.00                      | 100.00   | P2016 \$100.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 500.00                      |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page 10 of 34                  |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/13/2015         | Anthony Hernandez<br>California City, CA 93505  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | IT Specialist<br>USAF DOD Civil Servant   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 07/15/2015         | Hernandez Pruning<br>Ventura, CA 93001-3626   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 250.00                      | 350.00   | P2016 \$350.00                        |
| 11/22/2015         | Hernandez Pruning<br>Ventura, CA 93001-3626   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 100.00                      | 350.00   | P2016 \$350.00                        |
| 07/15/2015         | Shannon Hogan-Cohen<br>Piru, CA 93040   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Freelance Writer<br>Shannon Hogan-Cohen   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 07/09/2015         | Elaine Hunt<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 225.00   | P2016 \$225.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,950.00                    |  |                                       |

\*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



# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page <u>11</u> of <u>34</u>    |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/01/2015         | Elaine Hunt<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 125.00                      | 225.00   | P2016 \$225.00                        |
| 12/22/2015         | John McGrath & Sons<br>Santa Paula, CA 93060  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 12/22/2015         | John Shores Family Partnership<br>Santa Paula, CA 93060   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 07/18/2015         | Lillian G. Kiceniuk<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 10/03/2015         | Mary Ann Krause<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 200.00                      | 200.00   | P2016 \$200.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 925.00                      |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page <u>12</u> of <u>34</u>    |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/07/2015         | John Krist<br>Ojai, CA 93023  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | CEO<br>Farm Bureau of Ventura County  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 12/20/2015         | Leslie Leavens<br>Ventura, CA 93001   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Vice President<br>Leavens Ranches LLC   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 09/10/2015         | Robert M. Levin<br>Ojai, CA 93023-9533  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Physician<br>Ventura County   | 200.00                      | 200.00   | P2016 \$200.00                        |
| 11/13/2015         | Stohm Lippert<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Manager / Developer<br>Strohlm Lippert  | 250.00                      | 250.00   | P2016 \$250.00                        |
| 09/23/2015         | Mark S. Lisagor<br>Camarillo, CA 93010-1812   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Dentist<br>Dr. Mark S. Lisagor  | 200.00                      | 300.00   | P2016 \$300.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,000.00                    |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2015 |                                |
| through                 | 12/31/2015 | Page <u>13</u> of <u>34</u>    |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 11/22/2015         | Mark S. Lisagor<br>Camarillo, CA 93010-1812   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Dentist<br>Dr. Mark S. Lisagor  | 100.00                      | 300.00   | P2016 \$300.00                        |
| 08/19/2015         | James O. Lloyd-Butler<br>Oxnard, CA 93036   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>Jim Lloyd Butler Family Partnership   | 300.00                      | 300.00   | P2016 \$300.00                        |
| 12/21/2015         | Randolph M. Long<br>Camarillo, CA 93010   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Realtor<br>Troop Real Estate  | 500.00                      | 500.00   | P2016 \$500.00                        |
| 11/22/2015         | Simon G. Malk<br>San Diego, CA 92130  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | President<br>Accretive investments  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 07/17/2015         | Todd McDonald<br>Ventura, CA 93003  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 500.00                      | 500.00   | P2016 \$500.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,600.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page <u>14</u> of <u>34</u>    |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 12/22/2015         | Timothy McGrath<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>Timothy McGrath   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 08/31/2015         | Steven McLean<br>Stevenson Ranch, CA 91381  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Law Enforcement<br>City of Santa Paula  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 09/30/2015         | Jose Luis Melgar<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Photographer<br>Jose Luis Melgar  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 07/31/2015         | Ron Merkord<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner<br>Laser Innovations  | 500.00                      | 500.00   | P2016 \$500.00                        |
| 09/04/2015         | Gary Nasalroad<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 2,350.00                    |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2015 |                                |
| through                 | 12/31/2015 | Page 15 of 34                  |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/04/2015         | Otto & Sons, Inc. dba Otto & Son's Nursery<br>Fillmore, CA 93015-9718                           | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 125.00                      | 125.00   | P2016 \$125.00                        |
| 08/26/2015         | Judith R. Owen<br>Ventura, CA 93003-7514  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 12/24/2015         | Parkstone Companies<br>San Diego, CA 92103  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 500.00                      | 500.00   | P2016 \$500.00                        |
| 12/30/2015         | Michael Penrod<br>Westlake Village, CA 91361  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Real Estate<br>Parkstone Companies  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 12/31/2015         | Bernard M. Perez<br>Moorpark, CA 93021  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Project Manager<br>Cabrillo Economic<br>Development Corporation                               | 100.00                      | 100.00   | P2016 \$100.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,575.00                    |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2015 |                                |
| through                 | 12/31/2015 | Page 16 of 34                  |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 11/22/2015         | Susan V. Pinkerton<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Ranch Owner<br>Dan C. Pinkerton   | 500.00                      | 500.00   | P2016 \$500.00                        |
| 09/21/2015         | Jack Pitluk<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Controller<br>Applied Silicone Company  | 250.00                      | 250.00   | P2016 \$250.00                        |
| 07/26/2015         | John Procter<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 07/15/2015         | Rancho Temescal, LLC<br>Piru, CA 93040  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 10/22/2015         | Linda G. Robinson<br>Ventura, CA 93004  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 2,350.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page 17 of 34                  |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 11/22/2015         | Revis Robinson<br>Ventura, CA 93004   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 07/17/2015         | Jeff Roundy<br>Ventura, CA 93001  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Realtor<br>Keller Williams  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 08/21/2015         | Richard Rudman<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner<br>Remote Possibilities   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 07/30/2015         | Dennis A. Shaw<br>Ventura, CA 93003-4134  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Political Coordinator<br>Teamsters Union Local 196  | 300.00                      | 450.00   | P2016 \$450.00                        |
| 11/23/2015         | Dennis A. Shaw<br>Ventura, CA 93003-4134  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Political Coordinator<br>Teamsters Union Local 196  | 150.00                      | 450.00   | P2016 \$450.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,400.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2015 |                                |
| through                 | 12/31/2015 | Page 18 of 34                  |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 11/22/2015         | Lisa A. Solinas<br>Ojai, CA 93023-9533  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Physician<br>Ventura County   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 10/21/2015         | Southern CA Pipe Trades District Council #16<br>PAC (ID# 760715)<br>Los Angeles, CA 90020       | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input checked="" type="checkbox"/> SCC |   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 07/13/2015         | Esther Y. Spurgeon<br>Oxnard, CA 93030-2589   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Administrative Clerk<br>Channel Island Cooling  | 500.00                      | 500.00   | P2016 \$500.00                        |
| 08/24/2015         | Mark Summa<br>Ventura, CA 93003   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 300.00                      | 300.00   | P2016 \$300.00                        |
| 08/12/2015         | Sheila Tate<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>Sheila Tate   | 100.00                      | 100.00   | P2016 \$100.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,750.00                    |  |                                       |

\*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



**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2015 |                                |
| through                        | 12/31/2015 | Page <u>19</u> of <u>34</u>    |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)          | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|--|---|---|-----------------------------|--|---------------------------------------|
| 09/12/2015         | Alex M. Teague<br>Ventura, CA 93004  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Sr Vice President<br>Limoneira Co.  | 300.00                      | 300.00   | P2016 \$300.00                        |
| 12/17/2015         | Teamsters Local Union No. 186 Affiliated with<br>The Int'l Brotherhood of Teamsters<br>Ventura, CA 93003 | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 11/22/2015         | Connie R. Tushla<br>Santa Paula, CA 93060-1632   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Not Employed<br>N/A   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 07/13/2015         | Pauline Valenzuela<br>Oxnard, CA 93036-6278  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Cashier at the Derby Club<br>horse<br>State of California                                     | 750.00                      | 750.00   | P2016 \$750.00                        |
| 09/10/2015         | Patricia Verdugo Johnson<br>Ventura, CA 93003-1919   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Administrator<br>University of California   | 200.00                      | 200.00   | P2016 \$200.00                        |
| <b>SUBTOTAL \$</b> |  |   |   | 1,600.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2015 |                                |
| through                 | 12/31/2015 | Page 20 of 34                  |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 11/22/2015         | Mati Waiya<br>Ventura, CA 93004   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Executive Director<br>Wishtoyo Foundation   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 10/05/2015         | Jean-Marie Webster<br>Ventura, CA 93001   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Investor<br>Jean-Marie Webster  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 07/22/2015         | Fred Van Wingerden<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Flower Grower / Shipper<br>Pyramid Flowers Inc.   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 07/20/2015         | John C. Zaragoza<br>Oxnard, CA 93036  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | County Supervisor<br>County of Ventura  | 200.00                      | 750.00   | P2016 \$750.00                        |
| 08/31/2015         | John C. Zaragoza<br>Oxnard, CA 93036  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | County Supervisor<br>County of Ventura  | 50.00                       | 750.00   | P2016 \$750.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,350.00                    |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period  
from 07/01/2015  
through 12/31/2015

**CALIFORNIA FORM 460**

Page 21 of 34

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

I.D. NUMBER

1378005

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 12/16/2015         | John C. Zaragoza<br>Oxnard, CA 93036  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | County Supervisor<br>County of Ventura  | 500.00                      | 750.00   | P2016 \$750.00                        |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 500.00                      |  |                                       |

\*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

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded  
to whole dollars.

|                         |            |                             |
|-------------------------|------------|-----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b>  |
| from                    | 07/01/2015 |                             |
| through                 | 12/31/2015 | Page <u>22</u> of <u>34</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

I.D. NUMBER

1378005

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a)<br>OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b)<br>AMOUNT RECEIVED THIS PERIOD | (c)<br>AMOUNT PAID OR FORGIVEN THIS PERIOD*  | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e)<br>INTEREST PAID THIS PERIOD | (f)<br>ORIGINAL AMOUNT OF LOAN                  | (g)<br>CUMULATIVE CONTRIBUTIONS TO DATE                               |
|--|---|--|------------------------------------|--|--|----------------------------------|---|---|
| Martin Hernandez<br>Santa Paula, CA 93060<br><br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Council Member<br>Santa Paula   | \$ 0.00  | \$ 5,000.00                        | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 5,000.00<br><br>DATE DUE                        | 0.00%<br>RATE<br>\$ 0.00         | \$ 5,000.00<br><br>07/31/2015<br>DATE INCURRED  | CALENDAR YEAR<br>\$ 15,000.00<br>PER ELECTION**<br>\$ P2016 15,000.00 |
| Martin Hernandez<br>Santa Paula, CA 93060<br><br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Council Member<br>Santa Paula   | \$ 0.00  | \$ 10,000.00                       | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 10,000.00<br><br>DATE DUE                       | %<br>RATE<br>\$ 0.00             | \$ 10,000.00<br><br>12/28/2015<br>DATE INCURRED | CALENDAR YEAR<br>\$ 15,000.00<br>PER ELECTION**<br>\$ P2016 15,000.00 |
| <br><br>† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC   |   | \$   | \$                                 | <input type="checkbox"/> PAID<br>\$<br><input type="checkbox"/> FORGIVEN<br>\$           | \$<br><br>DATE DUE                                 | %<br>RATE<br>\$                  | \$<br><br>DATE INCURRED                         | CALENDAR YEAR<br>\$<br>PER ELECTION**<br>\$                           |
| <b>SUBTOTALS \$</b>  |   |  | 15,000.00 \$                       | 0.00 \$  | 15,000.00 \$                                       | 0.00                             |   |   |

**Schedule B Summary**

(Enter (e) on  
Schedule E, Line 3)

- Loans received this period ..... \$ 15,000.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$** 15,000.00  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

†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

\*Amounts forgiven or paid by another party also must be reported on Schedule A.  
\*\* If required.

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE C

|   |            |                             |
|---|------------|-----------------------------|
| Statement covers period                 |            | <b>CALIFORNIA FORM 460</b>  |
| from                                    | 07/01/2015 |                             |
| through                                 | 12/31/2015 | Page <u>23</u> of <u>34</u> |
| NAME OF FILER                           |            | I.D. NUMBER                 |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                     |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

| 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) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 10/20/2015    | Martha Brown<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Police<br>Santa Paula Police Dept.   | Baners                           | 161.25                    | 161.25  | P2016 \$161.25                     |
| 09/26/2015    | Kellie Jonas<br>Escondido, CA 92026-3109   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Director of Customer Appreciation<br>National Pens   | Pens received on<br>10/05/15     | 411.43                    | 411.43  | P2016 \$411.43                     |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  |                                  |                           |   |                                    |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  |                                  |                           |   |                                    |

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$** 572.68

**Schedule C Summary**

|  |                 |        |
|--|-----------------|--------|
| 1. Amount received this period – itemized nonmonetary contributions.<br>(Include all Schedule C subtotals.) .....                                    | \$              | 572.68 |
| 2. Amount received this period – unitemized nonmonetary contributions of less than \$100 .....   | \$              | 0.00   |
| 3. Total nonmonetary contributions received this period.<br>(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... | <b>TOTAL \$</b> | 572.68 |

\*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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page 24 of 34                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 0.75        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 34.80       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 23.30       |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 58.85

**Schedule E Summary**

|  |                 |           |
|--|-----------------|-----------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) .....   | \$              | 17,811.37 |
| 2. Unitemized payments made this period of under \$100 .....   | \$              | 0.10      |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .....                   | \$              | 0.00      |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... | <b>TOTAL \$</b> | 17,811.47 |

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page 25 of 34                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 9.30        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 26.80       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 17.50       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 3.50        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 26.25       |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$ 83.35**

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page 26 of 34                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 1.75        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 12.25       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 3.50        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 26.25       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 26.25       |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$ 70.00**



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page 27 of 34                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 26.25       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 8.75        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 10.50       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 26.25       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 3.50        |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 75.25

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page 28 of 34                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 0.03        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 5.25        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 0.87        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 8.75        |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee         | 7.00        |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$ 21.90**

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page 29 of 34                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT                 | AMOUNT PAID |
|---|------|----|--|-------------|
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee                         | 15.75       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee                         | 26.25       |
| Democracy.com<br>Brooklyn, NY 11201                                 | OFC  |    | Processing fee                         | 27.13       |
| Holly Doering<br>Santa Paula, CA 93060                              | MTG  |    | 11/22/15 Food for event for 110 people | 1,440.07    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |  | 780.00      |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 2,289.20

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page <u>30</u> of <u>34</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    |                        | 1,094.84    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                        | 1,500.00    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    |                        | 180.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                        | 1,500.00    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | OFC  |    |                        | 51.49       |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 4,326.33

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page <u>31</u> of <u>34</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                        | 2,500.00    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                        | 2,500.00    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                        | 2,500.09    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    |                        | 320.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | OFC  |    |                        | 66.40       |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 7,886.49

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 07/01/2015 |                                |
| through                                 | 12/31/2015 | Page <u>32</u> of <u>34</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |    |                        | 1,000.00    |
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |    |                        | 500.00      |
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |    |                        | 500.00      |
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |    |                        | 500.00      |
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |    |                        | 500.00      |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 3,000.00

**Schedule F  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2015 |                                |
| through                 | 12/31/2015 | Page 33 of 34                  |
| I.D. NUMBER             |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR<br>DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Yolanda Miranda & Associates<br>Covina, CA 91722                       | PRO                               | 0.00  | 500.00                                | 0.00  | 500.00   |
|  |                                   |   |                                       |   |  |
|  |                                   |   |                                       |   |  |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

|                     |        |          |        |        |
|---------------------|--------|----------|--------|--------|
| <b>SUBTOTALS \$</b> | 0.00\$ | 500.00\$ | 0.00\$ | 500.00 |
|---------------------|--------|----------|--------|--------|

**Schedule F Summary**

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$** 500.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$** 0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 500.00  
May be a negative number

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

Statement covers period  
 from 07/01/2015  
 through 12/31/2015

SCHEDULE G

**CALIFORNIA FORM 460**

Page 34 of 34

I.D. NUMBER  
1378005

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Holly Doering

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT                 | AMOUNT PAID |
|---|------|----|--|-------------|
| Flight 126 Cafe<br>Santa Paula, CA 93060  | MTG  |    | 11/22/15 Food for event for 110 people | 1,440.00    |
|   |      |    |  |             |
|   |      |    |  |             |
|   |      |    |  |             |
|   |      |    |  |             |

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$ 1,440.00**

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.



# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Date Stamp

E-Filed  
04/30/2016  
17:10:27

Filing ID:  
160307821

|   |   |
|---|---|
| <b>Statement covers period</b><br>from <u>01/01/2016</u><br><br>through <u>04/23/2016</u> | <b>Date of election if applicable:</b><br>(Month, Day, Year)<br><br><u>06/07/2016</u> |
|---|---|

SEE INSTRUCTIONS ON REVERSE

### 1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall  
*(Also Complete Part 5)*
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored  
*(Also Complete Part 6)*
- Primarily Formed Candidate/Officeholder Committee  
*(Also Complete Part 7)*

### 2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
*(Also file a Form 410 Termination)*
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

Amending Schedule A to include missing information.

### 3. Committee Information

I.D. NUMBER  
1378005

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Martin F. Hernandez for Supervisor 2016

STREET ADDRESS (NO P.O. BOX)

|                    |           |              |                      |
|--------------------|-----------|--------------|----------------------|
| CITY               | STATE     | ZIP CODE     | AREA CODE/PHONE      |
| <u>Santa Paula</u> | <u>CA</u> | <u>93060</u> | <u>(805)390-2077</u> |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS  
pcnova54@gmail.com

### Treasurer(s)

NAME OF TREASURER  
Yolanda Miranda

MAILING ADDRESS

|               |           |              |                      |
|---------------|-----------|--------------|----------------------|
| CITY          | STATE     | ZIP CODE     | AREA CODE/PHONE      |
| <u>Covina</u> | <u>CA</u> | <u>91722</u> | <u>(626)915-7635</u> |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS

### 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 04/30/2016  
Date

By Yolanda Miranda  
Signature of Treasurer or Assistant Treasurer

Executed on 04/30/2016  
Date

By Martin F. Hernandez  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Martin F. Hernandez

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

County Supervisor: Ventura District 3

| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY        | STATE | ZIP   |
|---|-------------|-------|-------|
|   | Santa Paula | CA    | 93060 |

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

| COMMITTEE NAME                            | I.D. NUMBER |
|---|-------------|
| Martin F. Hernandez for City Council 2012 | 1350169     |

| NAME OF TREASURER | CONTROLLED COMMITTEE?   |
|-------------------|---|
|                   | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |          |                      |
|-------------------|------------------------------|----------|----------------------|
| CITY              | STATE                        | ZIP CODE | AREA CODE/PHONE      |
|                   | Santa Paula                  | CA       | 93060 (805) 390-2077 |

| COMMITTEE NAME | I.D. NUMBER |
|----------------|-------------|
|                |             |

| NAME OF TREASURER | CONTROLLED COMMITTEE?                                    |
|-------------------|--|
|                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |          |                 |
|-------------------|------------------------------|----------|-----------------|
| CITY              | STATE                        | ZIP CODE | AREA CODE/PHONE |
|                   |                              |          |                 |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|----------------------|--------------|---|
|                      |              |   |

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|
|                       |                     |

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|-----------------------------------|-----------------------|---|
|                                   |                       |   |
|                                   |                       |   |
|                                   |                       |   |
|                                   |                       |   |

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 01/01/2016 |                                |
| through                 | 04/23/2016 | Page <u>3</u> of <u>24</u>     |
|                         |            | I.D. NUMBER<br>1378005         |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

## Contributions Received

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions ..... Schedule A, Line 3    | \$ 11,455.00   | \$ 11,455.00                               |
| 2. Loans Received ..... Schedule B, Line 3            | 0.00   | 15,000.00                                  |
| 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2  | \$ 11,455.00   | \$ 26,455.00                               |
| 4. Nonmonetary Contributions ..... Schedule C, Line 3 | 0.00   | 0.00                                       |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 | \$ 11,455.00   | \$ 26,455.00                               |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            | 1/1 through 6/30 | 7/1 to Date |
|----------------------------|------------------|-------------|
| 20. Contributions Received | \$ _____         | \$ _____    |
| 21. Expenditures Made      | \$ _____         | \$ _____    |

## Expenditures Made

|   | Column A     | Column B     |
|---|--------------|--------------|
| 6. Payments Made ..... Schedule E, Line 4                   | \$ 30,494.43 | \$ 30,494.43 |
| 7. Loans Made ..... Schedule H, Line 3                      | 0.00         | 0.00         |
| 8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7             | \$ 30,494.43 | \$ 30,494.43 |
| 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 | 2,049.43     | 2,549.43     |
| 10. Nonmonetary Adjustment ..... Schedule C, Line 3         | 0.00         | 0.00         |
| 11. TOTALEXPENDITURES MADE ..... Add Lines 8 + 9 + 10       | \$ 32,543.86 | \$ 33,043.86 |

## Expenditure Limit Summary for State Candidates

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____                 | \$ _____      |
| ____/____/____                 | \$ _____      |

## Current Cash Statement

|   |              |
|---|--------------|
| 12. Beginning Cash Balance ..... Previous Summary Page, Line 16             | \$ 25,739.53 |
| 13. Cash Receipts ..... Column A, Line 3 above                              | 11,455.00    |
| 14. Miscellaneous Increases to Cash ..... Schedule I, Line 4                | 0.00         |
| 15. Cash Payments ..... Column A, Line 8 above                              | 30,494.43    |
| 16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 6,700.10  |
| <i>If this is a termination statement, Line 16 must be zero.</i>            |              |
| 17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2                       | \$ 0.00      |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

## Cash Equivalents and Outstanding Debts

|   |              |
|---|--------------|
| 18. Cash Equivalents ..... See instructions on reverse            | \$ 0.00      |
| 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above | \$ 17,549.43 |

# Schedule A Monetary Contributions Received

Amounts may be rounded  
to whole dollars.

SCHEDULE A

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 01/01/2016 |                            |
| through                 | 04/23/2016 | Page <u>4</u> of <u>24</u> |

SEE INSTRUCTIONS ON REVERSE

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 04/23/2016         | John W. Blanchard<br>Camarillo, CA 93012-4430   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 150.00                      | 150.00   | P2016 \$300.00                        |
| 04/14/2016         | Cohen Begun & Deck, LLP<br>Thousand Oaks, CA 91362  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 400.00                      | 400.00   | P2016 \$400.00                        |
| 03/05/2016         | Elaine Crandall<br>Oxnard, CA 93035   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Behavioral Health<br>Department Director<br>County of Ventura                                 | 250.00                      | 250.00   | P2016 \$250.00                        |
| 03/31/2016         | Diamond Realty<br>Fillmore, CA 93015  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 03/12/2016         | Luis Espinosa<br>Camarillo, CA 93012  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 250.00                      | 500.00   | P2016 \$500.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,800.00                    |  |                                       |

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 10,925.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 530.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 11,455.00

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 01/01/2016 |                                |
| through                        | 04/23/2016 | Page 5 of 24                   |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 04/23/2016         | Luis Espinosa<br>Camarillo, CA 93012  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 250.00                      | 500.00   | P2016 \$500.00                        |
| 04/23/2016         | Firefighters for Better Governmet (ID# 811189)<br>Camarillo, CA 93012                           | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 03/06/2016         | Laura Hernandez<br>Port Hueneme, CA 93041   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 250.00                      | 250.00   | P2016 \$250.00                        |
| 04/07/2016         | Betty B. Hyde<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 04/20/2016         | John McGrath & Sons<br>Santa Paula, CA 93060  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 500.00                      | 500.00   | P2016 \$750.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,950.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 01/01/2016 |                                |
| through                        | 04/23/2016 | Page <u>6</u> of <u>24</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 04/20/2016         | John Shores Family Partnership<br>Santa Paula, CA 93060   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 500.00                      | 500.00   | P2016 \$750.00                        |
| 04/07/2016         | W. John Kulwiec<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Architect<br>W. John Kulwiec  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 02/13/2016         | Byron J. Lawler<br>Somis, CA 93066  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Property Manager<br>Byron J. Lawler   | 125.00                      | 125.00   | P2016 \$125.00                        |
| 02/29/2016         | Randall W. Lewis<br>Claremont, CA 91711   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Executive Vice President<br>Lewis Management Corporation                                      | 375.00                      | 375.00   | P2016 \$375.00                        |
| 02/29/2016         | Richard A. Lewis<br>Upland, CA 91785  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | President<br>Lewis Management Corporation   | 375.00                      | 375.00   | P2016 \$375.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,475.00                    |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 01/01/2016 |                                |
| through                        | 04/23/2016 | Page <u>7</u> of <u>24</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 04/11/2016         | Stewart W. Lockwood<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Manager<br>Limoneira Co.  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 03/25/2016         | Olivia Carrera Lopez<br>Fillmore, CA 93015  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 03/07/2016         | Thomas Lucas<br>Moorpark, CA 93021  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner/Operator<br>Performance Nursery   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 01/07/2016         | Lynn E. Maulhardt<br>Oxnard, CA 93030-5001  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 04/12/2016         | Todd McDonald<br>Ventura, CA 93003  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 250.00                      | 250.00   | P2016 \$750.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,400.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 01/01/2016 |                                |
| through                 | 04/23/2016 | Page <u>8</u> of <u>24</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 04/20/2016         | George Ortiz<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 04/08/2016         | Jack Pitluk<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Controller<br>Applied Silicone Company  | 250.00                      | 250.00   | P2016 \$500.00                        |
| 03/21/2016         | Joseph R. Polito<br>Ventura, CA 93001   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Realtor<br>Joseph R. Polito   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 01/25/2016         | James Procter<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Procter & Shyer<br>James Procter  | 250.00                      | 250.00   | P2016 \$250.00                        |
| 01/14/2016         | Gregory Ramirez<br>Ventura, CA 93003  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Attorney<br>Ball & Yorke  | 250.00                      | 250.00   | P2016 \$250.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,200.00                    |  |                                       |

\*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



**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 01/01/2016 |                                |
| through                        | 04/23/2016 | Page <u>9</u> of <u>24</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 01/22/2016         | Craig Underwood<br>Carlsbad, CA 92010   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>Underwood Ranches   | 500.00                      | 500.00   | P2016 \$500.00                        |
| 03/25/2016         | Christina Urias<br>Santa Paula, CA 93060-1311   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | School Board Member<br>Santa Paula Unified  | 100.00                      | 100.00   | P2016 \$175.00                        |
| 02/18/2016         | Ventura County Agricultural Assn. PAC (ID# 1222564)<br>Camarillo, CA 93010                      | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 01/09/2016         | Ventura Ranch Resort<br>Santa Paula, CA 93060   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 04/08/2016         | David A. Wilkinson<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner<br>Fillmore Western Railway   | 250.00                      | 250.00   | P2016 \$250.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 2,350.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period  
from 01/01/2016  
through 04/23/2016

**CALIFORNIA FORM 460**  
Page 10 of 24  
I.D. NUMBER  
1378005

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 02/03/2016         | Lance K. Williams<br>Santa Clarita, CA 91350-2987   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner<br>Williams Homes   | 750.00                      | 750.00   | P2016 \$750.00                        |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 750.00                      |  |                                       |

\*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

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded  
to whole dollars.

|                         |            |                             |
|-------------------------|------------|-----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b>  |
| from                    | 01/01/2016 |                             |
| through                 | 04/23/2016 | Page <u>11</u> of <u>24</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

I.D. NUMBER

1378005

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a)<br>OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b)<br>AMOUNT RECEIVED THIS PERIOD | (c)<br>AMOUNT PAID OR FORGIVEN THIS PERIOD*  | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e)<br>INTEREST PAID THIS PERIOD | (f)<br>ORIGINAL AMOUNT OF LOAN                  | (g)<br>CUMULATIVE CONTRIBUTIONS TO DATE                          |
|--|---|--|------------------------------------|--|--|----------------------------------|---|--|
| Martin Hernandez<br>Santa Paula, CA 93060<br><br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Council Member<br>Santa Paula   | \$ 5,000.00                                      | \$ 0.00                            | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 5,000.00<br><br>DATE DUE                        | 0.00%<br>RATE<br>\$ 0.00         | \$ 5,000.00<br><br>07/31/2015<br>DATE INCURRED  | CALENDAR YEAR<br>\$ 0.00<br>PER ELECTION**<br>\$ P2016 15,000.00 |
| Martin Hernandez<br>Santa Paula, CA 93060<br><br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Council Member<br>Santa Paula   | \$ 10,000.00                                     | \$ 0.00                            | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 10,000.00<br><br>DATE DUE                       | %<br>RATE<br>\$ 0.00             | \$ 10,000.00<br><br>12/28/2015<br>DATE INCURRED | CALENDAR YEAR<br>\$ 0.00<br>PER ELECTION**<br>\$ P2016 15,000.00 |
| <br><br>† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC   |   | \$   | \$                                 | <input type="checkbox"/> PAID<br>\$<br><input type="checkbox"/> FORGIVEN<br>\$           | \$<br><br>DATE DUE                                 | %<br>RATE<br>\$                  | \$<br><br>DATE INCURRED                         | CALENDAR YEAR<br>\$<br>PER ELECTION**<br>\$                      |
| <b>SUBTOTALS \$</b>  |   |  | 0.00 \$                            | 0.00 \$  | 15,000.00 \$                                       | 0.00                             |   |  |

**Schedule B Summary**

(Enter (e) on  
Schedule E, Line 3)

- Loans received this period ..... \$ 0.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$** 0.00  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

†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

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 01/01/2016 |                                |
| through                                 | 04/23/2016 | Page 12 of 24                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Kmart<br>Santa Paula, CA 93060                                      | OFC  |    |                        | 48.22       |
| Lupita's Wireless<br>Santa Paula, CA 93060                          | OFC  |    |                        | 196.67      |
| Nation Builder<br>Los Angeles, CA 90017                             | OFC  |    |                        | 199.00      |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 443.89

**Schedule E Summary**

|  |                 |                  |
|--|-----------------|------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) .....   | \$              | 30,202.72        |
| 2. Unitemized payments made this period of under \$100 .....   | \$              | 291.71           |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .....                   | \$              | 0.00             |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... | <b>TOTAL \$</b> | <b>30,494.43</b> |

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 01/01/2016 |                                |
| through                                 | 04/23/2016 | Page <u>13</u> of <u>24</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Nation Builder<br>Los Angeles, CA 90017                             | OFC  |    |                        | 459.00      |
| Nation Builder<br>Los Angeles, CA 90017                             | OFC  |    |                        | 199.00      |
| Nation Builder<br>Los Angeles, CA 90017                             | OFC  |    |                        | 459.00      |
| Nation Builder<br>Los Angeles, CA 90017                             | OFC  |    |                        | 199.00      |
| Sarah Gonzalez<br>Santa Paula, CA 93060                             | OFC  |    | Campaign office space  | 300.00      |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 1,616.00

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 01/01/2016 |                                |
| through                                 | 04/23/2016 | Page <u>14</u> of <u>24</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Sarah Gonzalez<br>Santa Paula, CA 93060                             | OFC  |    | Campaign office space  | 300.00      |
| Sarah Gonzalez<br>Santa Paula, CA 93060                             | OFC  |    | Campaign office space  | 300.00      |
| The UPS Store<br>Santa Paula, CA 93060                              | LIT  |    |                        | 82.02       |
| The UPS Store<br>Santa Paula, CA 93060                              | POS  |    |                        | 54.00       |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                        | 5,000.00    |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 5,736.02

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 01/01/2016 |                                |
| through                                 | 04/23/2016 | Page 15 of 24                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT                        | AMOUNT PAID |
|---|------|----|---|-------------|
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |   | 4,100.00    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | OFC  |    | Reimbursements for office expenses            | 37.50       |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | OFC  |    | Reimbursement for Democrat and Union art work | 200.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    |   | 165.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    |   | 692.39      |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 5,194.89

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 01/01/2016 |                                |
| through                                 | 04/23/2016 | Page 16 of 24                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT            | AMOUNT PAID |
|---|------|----|-----------------------------------|-------------|
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                                   | 4,100.00    |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | WEB  |    | Website Development               | 500.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | OFC  |    | Reimbursement for office supplies | 119.95      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    | Stickers and labels               | 197.15      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    | Door hangers                      | 5,176.90    |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 10,094.00



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 01/01/2016 |                                |
| through                                 | 04/23/2016 | Page <u>17</u> of <u>24</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT     | AMOUNT PAID |
|---|------|----|----------------------------|-------------|
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    | Web mail                   | 120.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    | Design Services for Mailer | 120.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    | Mailer pdf                 | 120.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |    | Design Services for Mailer | 120.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                            | 4,100.00    |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 4,580.00

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 01/01/2016 |                                |
| through                                 | 04/23/2016 | Page <u>18</u> of <u>24</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR    | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|-------|------------------------|-------------|
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |       |                        | 500.00      |
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |       |                        | 500.00      |
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |       |                        | 500.00      |
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |       |                        | 500.00      |
| Your PR Girls<br>Ventura, CA 93001                                  | CMP  | Signs |                        | 537.92      |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 2,537.92

# Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded  
to whole dollars.

|   |            |                            |
|---|------------|----------------------------|
| Statement covers period                 |            | <b>CALIFORNIA FORM 460</b> |
| from                                    | 01/01/2016 |                            |
| through                                 | 04/23/2016 | Page 19 of 24              |
| NAME OF FILER                           |            | I.D. NUMBER                |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                    |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|--------------------------------|---|---------------------------------------|---|--|
| Yolanda Miranda & Associates<br>Covina, CA 91722                       | PRO                            | 500.00  | 0.00                                  | 500.00  | 0.00   |
| Netfile<br>Mariposa, CA 95338  | PRO                            | 0.00  | 200.00                                | 0.00  | 200.00   |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045                  | LIT Stickers                   | 0.00  | 125.40                                | 0.00  | 125.40   |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

|                     |          |          |          |        |
|---------------------|----------|----------|----------|--------|
| <b>SUBTOTALS \$</b> | 500.00\$ | 325.40\$ | 500.00\$ | 325.40 |
|---------------------|----------|----------|----------|--------|

## Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$** 2,549.43
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$** 500.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 2,049.43  
May be a negative number

**Schedule F  
(Continuation Sheet)  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 01/01/2016 |                                |
| through                                 | 04/23/2016 | Page 20 of 24                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR<br>DESCRIPTION OF PAYMENT      | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|--|---|---------------------------------------|---|--|
| Your PR Girls<br>Ventura, CA 93001                                     | CMP Signs                              | 0.00  | 537.92                                | 0.00  | 537.92   |
| Holly Doering<br>Santa Paula, CA 93060                                 | Reimbursement for<br>campaign expenses | 0.00  | 394.58                                | 0.00  | 394.58   |
| Martin Hernandez<br>Santa Paula, CA 93060                              | FIL Filing fee                         | 0.00  | 1,291.53                              | 0.00  | 1,291.53   |
| <b>SUBTOTALS \$</b>  |  | <b>0.00 \$</b>  | <b>2,224.03 \$</b>                    | <b>0.00 \$</b>  | <b>2,224.03</b>  |

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

Statement covers period  
 from 01/01/2016  
 through 04/23/2016

SCHEDULE G

**CALIFORNIA FORM 460**

Page 21 of 24

I.D. NUMBER  
1378005

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Holly Doering

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| FedEx<br>Santa Paula, CA 93003  | LIT  |    | Copies                 | 158.56      |
| Kmart<br>Santa Paula, CA 93060  | OFC  |    |                        | 140.43      |
|   |      |    |                        |             |
|   |      |    |                        |             |

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 298.99

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

Statement covers period  
 from 01/01/2016  
 through 04/23/2016

SCHEDULE G  
**CALIFORNIA FORM 460**  
 Page 22 of 24  
 I.D. NUMBER  
 1378005

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Trujillo Communications, LLC

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Errant Art<br>Santa Rosa, CA 95404  | CMP  |    | Signs                  | 692.39      |
| Errant Art<br>Santa Rosa, CA 95404  | CMP  |    | Signs                  | 165.00      |
| Eye on Color<br>Burbank, CA 91504   | LIT  |    |                        | 200.00      |
| Eye on Color<br>Burbank, CA 91504   | LIT  |    | Doorhanger             | 5,176.90    |

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 6,234.29

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule G (Continuation Sheet)**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

Statement covers period  
 from 01/01/2016  
 through 04/23/2016

**CALIFORNIA FORM 460**  
 Page 23 of 24

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

I.D. NUMBER

1378005

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Trujillo Communications, LLC

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT     | AMOUNT PAID |
|---|------|----|----------------------------|-------------|
| Eye on Color<br>Burbank, CA 91504   | LIT  |    | Labels                     | 197.15      |
| Eye on Color<br>Burbank, CA 91504   | LIT  |    |                            | 120.00      |
| Eye on Color<br>Burbank, CA 91504   | LIT  |    | Design Services for Mailer | 120.00      |
| Eye on Color<br>Burbank, CA 91504   | LIT  |    |                            | 120.00      |

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$ 557.15**

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule G (Continuation Sheet)**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

Statement covers period  
 from 01/01/2016  
 through 04/23/2016

**CALIFORNIA FORM 460**  
 Page 24 of 24

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

I.D. NUMBER

1378005

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Trujillo Communications, LLC

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT     | AMOUNT PAID |
|---|------|----|----------------------------|-------------|
| Eye on Color<br>Burbank, CA 91504   | LIT  |    | Design Services for Mailer | 120.00      |
|   |      |    |                            |             |
|   |      |    |                            |             |
|   |      |    |                            |             |
|   |      |    |                            |             |

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$ 120.00**

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.



# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

|            |   |   |
|------------|---|---|
| Date Stamp | <div style="border: 2px solid red; padding: 5px; color: red;">                     E-Filed<br/>                     05/26/2016<br/>                     15:13:16<br/><br/>                     Filing ID:<br/>                     160513643                 </div> | CALIFORNIA<br>FORM <b>460</b>                           |
|            |   | Page <u>1</u> of <u>22</u><br><br>For Official Use Only |

|  |   |
|--|---|
| <p style="text-align: center;"><b>Statement covers period</b></p> <p>from <u>04/24/2016</u></p> <p>through <u>05/21/2016</u></p> | <p><b>Date of election if applicable:</b><br/>(Month, Day, Year)</p> <p><u>06/07/2016</u></p> |
|--|---|

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><i>(Also Complete Part 5)</i> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="checkbox"/> Controlled<br><input type="checkbox"/> Sponsored<br><i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee      | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i>  |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Preelection Statement<br><input type="checkbox"/> Semi-annual Statement<br><input type="checkbox"/> Termination Statement<br>(Also file a Form 410 Termination)<br><input type="checkbox"/> Amendment (Explain below) | <input type="checkbox"/> Quarterly Statement<br><input type="checkbox"/> Special Odd-Year Report<br><input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
|---|---|

**3. Committee Information**

I.D. NUMBER  
1378005

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Martin F. Hernandez for Supervisor 2016

STREET ADDRESS (NO P.O. BOX)

|                    |           |              |                      |
|--------------------|-----------|--------------|----------------------|
| CITY               | STATE     | ZIP CODE     | AREA CODE/PHONE      |
| <u>Santa Paula</u> | <u>CA</u> | <u>93060</u> | <u>(805)390-2077</u> |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS  
pcnova54@gmail.com

**Treasurer(s)**

NAME OF TREASURER  
Yolanda Miranda

MAILING ADDRESS

|               |           |              |                      |
|---------------|-----------|--------------|----------------------|
| CITY          | STATE     | ZIP CODE     | AREA CODE/PHONE      |
| <u>Covina</u> | <u>CA</u> | <u>91722</u> | <u>(626)915-7635</u> |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 05/26/2016  
Date

By Yolanda Miranda  
Signature of Treasurer or Assistant Treasurer

Executed on 05/26/2016  
Date

By Martin F. Hernandez  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
 \_\_\_\_\_  
 Martin F. Hernandez

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
 \_\_\_\_\_  
 County Supervisor: Ventura District 3

| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY        | STATE | ZIP   |
|---|-------------|-------|-------|
| _____   | Santa Paula | CA    | 93060 |

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

| COMMITTEE NAME                            | I.D. NUMBER |
|---|-------------|
| Martin F. Hernandez for City Council 2012 | 1350169     |

| NAME OF TREASURER | CONTROLLED COMMITTEE?   |
|-------------------|---|
| _____             | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |          |                 |
|-------------------|------------------------------|----------|-----------------|
| _____             | _____                        | _____    | _____           |
| CITY              | STATE                        | ZIP CODE | AREA CODE/PHONE |
| Santa Paula       | CA                           | 93060    | (805) 390-2077  |

| COMMITTEE NAME | I.D. NUMBER |
|----------------|-------------|
| _____          | _____       |

| NAME OF TREASURER | CONTROLLED COMMITTEE?                                    |
|-------------------|--|
| _____             | <input type="checkbox"/> YES <input type="checkbox"/> NO |

| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |          |                 |
|-------------------|------------------------------|----------|-----------------|
| _____             | _____                        | _____    | _____           |
| CITY              | STATE                        | ZIP CODE | AREA CODE/PHONE |
| _____             | _____                        | _____    | _____           |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE  
 \_\_\_\_\_

| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|----------------------|--------------|---|
| _____                | _____        | _____   |

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT  
 \_\_\_\_\_

| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|
| _____                 | _____               |

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|-----------------------------------|-----------------------|---|
| _____                             | _____                 | _____   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| _____                             | _____                 | _____   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| _____                             | _____                 | _____   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| _____                             | _____                 | _____   |

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 04/24/2016 |                                |
| through                                 | 05/21/2016 | Page <u>3</u> of <u>22</u>     |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

## Contributions Received

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions ..... Schedule A, Line 3    | \$ 9,883.93  | \$ 21,338.93                               |
| 2. Loans Received ..... Schedule B, Line 3            | 0.00   | 15,000.00                                  |
| 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2  | \$ 9,883.93  | \$ 36,338.93                               |
| 4. Nonmonetary Contributions ..... Schedule C, Line 3 | 402.30   | 402.30                                     |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 | \$ 10,286.23   | \$ 36,741.23                               |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            | 1/1 through 6/30 | 7/1 to Date |
|----------------------------|------------------|-------------|
| 20. Contributions Received | \$ _____         | \$ _____    |
| 21. Expenditures Made      | \$ _____         | \$ _____    |

## Expenditures Made

|   | Column A     | Column B     |
|---|--------------|--------------|
| 6. Payments Made ..... Schedule E, Line 4                   | \$ 10,744.34 | \$ 41,238.77 |
| 7. Loans Made ..... Schedule H, Line 3                      | 0.00         | 0.00         |
| 8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7             | \$ 10,744.34 | \$ 41,238.77 |
| 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 | 1,600.31     | 4,149.74     |
| 10. Nonmonetary Adjustment ..... Schedule C, Line 3         | 402.30       | 402.30       |
| 11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10      | \$ 12,746.95 | \$ 45,790.81 |

## Expenditure Limit Summary for State Candidates

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____                 | \$ _____      |
| ____/____/____                 | \$ _____      |

## Current Cash Statement

|   |             |
|---|-------------|
| 12. Beginning Cash Balance ..... Previous Summary Page, Line 16             | \$ 6,700.10 |
| 13. Cash Receipts ..... Column A, Line 3 above                              | 9,883.93    |
| 14. Miscellaneous Increases to Cash ..... Schedule I, Line 4                | 50.00       |
| 15. Cash Payments ..... Column A, Line 8 above                              | 10,744.34   |
| 16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 5,889.69 |

If this is a termination statement, Line 16 must be zero.

|   |         |
|---|---------|
| 17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 | \$ 0.00 |
|---|---------|

## Cash Equivalents and Outstanding Debts

|   |              |
|---|--------------|
| 18. Cash Equivalents ..... See instructions on reverse            | \$ 0.00      |
| 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above | \$ 19,149.74 |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

# Schedule A Monetary Contributions Received

Amounts may be rounded  
to whole dollars.

SCHEDULE A

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 04/24/2016 |                            |
| through                 | 05/21/2016 | Page <u>4</u> of <u>22</u> |

SEE INSTRUCTIONS ON REVERSE

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 05/16/2016    | Joan Araujo<br>Ventura, CA 93001  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Chief Deputy Director<br>VCMC Hospital Replacement Wing                                       | 100.00                      | 100.00   | P2016 \$100.00                        |
| 05/09/2016    | Kathleen Back<br>Camarillo, CA 93012  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 04/30/2016    | Korinne Bell<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Deputy Agrigultural<br>Commissioner<br>County of Ventura                                      | 500.00                      | 500.00   | P2016 \$500.00                        |
| 05/21/2016    | Janet R. Bergamo<br>Piru, CA 93040  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Teacher<br>Fillmore USD   | 750.00                      | 750.00   | P2016 \$750.00                        |
| 05/14/2016    | Jose A. Bernard<br>Ventura, CA 93004  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Management Analyst<br>County of Ventura   | 200.00                      | 200.00   | P2016 \$400.00                        |

**SUBTOTAL \$** 1,750.00

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 8,324.99
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 1,558.94
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 9,883.93

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 04/24/2016 |                                |
| through                        | 05/21/2016 | Page <u>5</u> of <u>22</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 05/19/2016         | Charles Cohen<br>Westlake Village, CA 91361   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Attorney<br>CBD Lawyers   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 05/14/2016         | Creative Construction<br>Santa Paula, CA 93060  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 350.00                      | 350.00   | P2016 \$350.00                        |
| 04/30/2016         | Judy Diaz<br>Ojai, CA 93023   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Insurance Broker<br>Tolman & Wilder, Inc.   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 04/29/2016         | Luis Espinosa<br>Camarillo, CA 93012  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Interim Fire Chief<br>City of Santa Paula   | 100.00                      | 675.00   | P2016 \$675.00                        |
| 05/14/2016         | Luis Espinosa<br>Camarillo, CA 93012  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Interim Fire Chief<br>City of Santa Paula   | 75.00                       | 675.00   | P2016 \$675.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,025.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 04/24/2016 |                                |
| through                 | 05/21/2016 | Page <u>6</u> of <u>22</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 05/21/2016         | Margaret Federico<br>Oxnard, CA 93030-4031  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Emergency Manager for<br>Campus<br>University of California<br>Channel Islands                | 100.00                      | 100.00   | P2016 \$100.00                        |
| 05/12/2016         | Margaret A. Frost<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Rancher<br>Frost Ranch  | 500.00                      | 500.00   | P2016 \$500.00                        |
| 05/14/2016         | Greensource, Inc.<br>Fillmore, CA 93015   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 200.00                      | 200.00   | P2016 \$200.00                        |
| 04/30/2016         | David Gurrola<br>Fillmore, CA 93015-9722  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Fire Chief<br>City of Fillmore  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 05/14/2016         | John A. Holladay<br>Fillmore, CA 93015  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Realtor<br>Re/Max   | 250.00                      | 250.00   | P2016 \$250.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,150.00                    |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 04/24/2016 |                                |
| through                 | 05/21/2016 | Page <u>7</u> of <u>22</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 04/30/2016         | Jack A. Patterson M.D. a Medical Corp<br>Ojai, CA 93023-8337                                    | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 200.00                      | 200.00   | P2016 \$200.00                        |
| 05/14/2016         | Deborah B. Jackson<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Consultant<br>Deborah B. Jackson  | 150.00                      | 150.00   | P2016 \$150.00                        |
| 04/29/2016         | Don Jensen<br>Ventura, CA 93003   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Architect<br>Jensen Design  | 750.00                      | 750.00   | P2016 \$750.00                        |
| 04/24/2016         | Neil Jorgensen<br>Ojai, CA 93023  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Physician<br>Ventura County Medical Center  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 05/16/2016         | Scott Klittich<br>Fillmore, CA 93015  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>Scott Klittich self-employed  | 250.00                      | 250.00   | P2016 \$250.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,450.00                    |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 04/24/2016 |                                |
| through                 | 05/21/2016 | Page <u>8</u> of <u>22</u>     |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 04/30/2016         | Karl Krause<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 05/14/2016         | Mary Ann Krause<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 200.00                      | 200.00   | P2016 \$400.00                        |
| 05/14/2016         | La Cabana Restaurant<br>Santa Paula, CA 93060   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 100.00                      | 100.00   | P2016 \$100.00                        |
| 05/11/2016         | J. Link Leavens<br>Ventura, CA 93003  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>J.Link Leavens  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 04/30/2016         | Robert M. Levin<br>Ojai, CA 93023-9533  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Physician<br>Ventura County   | 500.00                      | 500.00   | P2016 \$700.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 1,200.00                    |  |                                       |

\*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



**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 04/24/2016 |                                |
| through                 | 05/21/2016 | Page 9 of 22                   |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 05/19/2016         | James O. Lloyd-Butler<br>Oxnard, CA 93036   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>Jim Lloyd Butler Family Partnership   | 100.00                      | 100.00   | P2016 \$400.00                        |
| 04/30/2016         | Mary Maranville<br>Ojai, CA 93023-1501  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Exec. Director<br>SEEAG   | 150.00                      | 150.00   | P2016 \$150.00                        |
| 05/18/2016         | Carol McCarty<br>Somis, CA 93066  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 05/14/2016         | Manuel Minjares<br>Fillmore, CA 93015-1040  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Council Member<br>City of Fillmore  | 100.00                      | 100.00   | P2016 \$100.00                        |
| 04/30/2016         | Katheyjo Obregon<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Nurse<br>County of Ventura  | 100.00                      | 100.00   | P2016 \$100.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 550.00                      |  |                                       |

\*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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 04/24/2016 |                                |
| through                 | 05/21/2016 | Page <u>10</u> of <u>22</u>    |

|  |                        |
|--|------------------------|
| NAME OF FILER<br>Martin F. Hernandez for Supervisor 2016 | I.D. NUMBER<br>1378005 |
|--|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 05/14/2016         | Linda G. Robinson<br>Ventura, CA 93004  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired<br>N/A  | 100.00                      | 100.00   | P2016 \$200.00                        |
| 05/14/2016         | Christopher Sayer<br>Santa Paula, CA 93060  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>Petty Ranch   | 200.00                      | 250.00   | P2016 \$250.00                        |
| 05/11/2016         | The Mud Creek Ranch<br>Santa Paula, CA 93060  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 250.00                      | 250.00   | P2016 \$250.00                        |
| 05/20/2016         | Craig Underwood<br>Carlsbad, CA 92010   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Farmer<br>Underwood Ranches   | 250.00                      | 750.00   | P2016 \$750.00                        |
| 04/30/2016         | Jane Ward<br>Ventura, CA 93003  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Health Educator<br>County of Ventura  | 100.00                      | 100.00   | P2016 \$100.00                        |
| <b>SUBTOTAL \$</b> |   |   |   | 900.00                      |  |                                       |

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period  
from 04/24/2016  
through 05/21/2016

**CALIFORNIA FORM 460**  
Page 11 of 22  
I.D. NUMBER  
1378005

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 05/14/2016         | David R. Wareham<br>Fillmore, CA 93015  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Officer<br>County of Ventura  | 200.00                      | 200.00   | P2016 \$200.00                        |
| 05/14/2016         | David A. Wilkinson<br>Santa Paula, CA 93060   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner<br>Fillmore Western Railway   | 99.99                       | 349.99   | P2016 \$349.99                        |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 299.99                      |  |                                       |

\*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

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded to whole dollars.

|                         |            |                             |
|-------------------------|------------|-----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b>  |
| from                    | 04/24/2016 |                             |
| through                 | 05/21/2016 | Page <u>12</u> of <u>22</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

I.D. NUMBER

1378005

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a)<br>OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b)<br>AMOUNT RECEIVED THIS PERIOD | (c)<br>AMOUNT PAID OR FORGIVEN THIS PERIOD*  | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e)<br>INTEREST PAID THIS PERIOD | (f)<br>ORIGINAL AMOUNT OF LOAN                  | (g)<br>CUMULATIVE CONTRIBUTIONS TO DATE                          |
|--|---|--|------------------------------------|--|--|----------------------------------|---|--|
| Martin Hernandez<br>Santa Paula, CA 93060<br><br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Council Member<br>Santa Paula   | \$ 5,000.00                                      | \$ 0.00                            | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 5,000.00<br><br>DATE DUE                        | 0.00%<br>RATE<br>\$ 0.00         | \$ 5,000.00<br><br>07/31/2015<br>DATE INCURRED  | CALENDAR YEAR<br>\$ 0.00<br>PER ELECTION**<br>\$ P2016 15,000.00 |
| Martin Hernandez<br>Santa Paula, CA 93060<br><br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Council Member<br>Santa Paula   | \$ 10,000.00                                     | \$ 0.00                            | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 10,000.00<br><br>DATE DUE                       | %<br>RATE<br>\$ 0.00             | \$ 10,000.00<br><br>12/28/2015<br>DATE INCURRED | CALENDAR YEAR<br>\$ 0.00<br>PER ELECTION**<br>\$ P2016 15,000.00 |
| <br><br>† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC   |   | \$   | \$                                 | <input type="checkbox"/> PAID<br>\$<br><input type="checkbox"/> FORGIVEN<br>\$           | \$<br><br>DATE DUE                                 | %<br>RATE<br>\$                  | \$<br><br>DATE INCURRED                         | CALENDAR YEAR<br>\$<br>PER ELECTION**<br>\$                      |
| <b>SUBTOTALS \$</b>  |   |  | 0.00 \$                            | 0.00 \$  | 15,000.00 \$                                       | 0.00                             |   |  |

**Schedule B Summary**

(Enter (e) on Schedule E, Line 3)

- Loans received this period ..... \$ 0.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$** 0.00  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

†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

\*Amounts forgiven or paid by another party also must be reported on Schedule A.  
\*\* If required.

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 04/24/2016 |                                |
| through                                 | 05/21/2016 | Page <u>13</u> of <u>22</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

| 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) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 05/05/2016   | H. Bolton Company<br>Santa Paula, CA 93060   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | Signs                            | 152.30                    | 152.30  | P2016 \$152.30                     |
| 05/04/2016   | Martin F. Hernandez for City Council<br>2012 (ID# 1350169)<br>Santa Paula, CA 93060          | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | Lawn signs                       | 250.00                    | 250.00  | P2016 \$250.00                     |
|  |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  |                                  |                           |   |                                    |
|  |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  |                                  |                           |   |                                    |
| <i>Attach additional information on appropriately labeled continuation sheets.</i> |  |   |  |                                  | <b>SUBTOTAL \$</b>        | 402.30  |                                    |

**Schedule C Summary**

|  |                 |        |
|--|-----------------|--------|
| 1. Amount received this period – itemized nonmonetary contributions.<br>(Include all Schedule C subtotals.) .....                                    | \$              | 402.30 |
| 2. Amount received this period – unitemized nonmonetary contributions of less than \$100 .....   | \$              | 0.00   |
| 3. Total nonmonetary contributions received this period.<br>(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... | <b>TOTAL \$</b> | 402.30 |

\*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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 04/24/2016 |                                |
| through                                 | 05/21/2016 | Page 14 of 22                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee         | 2.90        |
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee         | 24.65       |
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee         | 2.90        |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 30.45

**Schedule E Summary**

|  |                 |                  |
|--|-----------------|------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) .....   | \$              | 10,726.51        |
| 2. Unitemized payments made this period of under \$100 .....   | \$              | 17.83            |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .....                   | \$              | 0.00             |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... | <b>TOTAL \$</b> | <b>10,744.34</b> |

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 04/24/2016 |                                |
| through                                 | 05/21/2016 | Page 15 of 22                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee         | 5.80        |
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee         | 1.45        |
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee         | 2.90        |
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee         | 7.25        |
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee         | 2.90        |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 20.30

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 04/24/2016 |                                |
| through                                 | 05/21/2016 | Page 16 of 22                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT              | AMOUNT PAID |
|---|------|----|-------------------------------------|-------------|
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    | Processing fee                      | 2.90        |
| Authorize.Net<br>American Fork, UT 84003                            | OFC  |    |                                     | 14.50       |
| Holly Doering<br>Santa Paula, CA 93060                              |      |    | Reimbursement for campaign expenses | 394.58      |
| H. Bolton Company<br>Santa Paula, CA 93060                          | LIT  |    |                                     | 131.75      |
| Lupita's Wireless<br>Santa Paula, CA 93060                          | OFC  |    |                                     | 131.11      |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 674.84



**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 04/24/2016 |                                |
| through                                 | 05/21/2016 | Page <u>17</u> of <u>22</u>    |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Nation Builder<br>Los Angeles, CA 90017                             | OFC  |    |                        | 459.00      |
| Nation Builder<br>Los Angeles, CA 90017                             | OFC  |    |                        | 199.00      |
| Santa Paula Times<br>Santa Paula, CA 93060                          | PRT  |    |                        | 204.00      |
| Sutton Law Firm<br>San Francisco, CA 94108                          | PRO  |    |                        | 726.00      |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | CNS  |    |                        | 4,100.00    |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 5,688.00

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 04/24/2016 |                                |
| through                                 | 05/21/2016 | Page 18 of 22                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR    | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|-------|------------------------|-------------|
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | OFC  |       |                        | 25.00       |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045               | LIT  |       |                        | 3,250.00    |
| Yolanda Miranda & Associates<br>Covina, CA 91722                    | PRO  |       |                        | 500.00      |
| Your PR Girls<br>Ventura, CA 93001                                  | CMP  | Signs |                        | 537.92      |
|   |      |       |                        |             |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 4,312.92

**Schedule F  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

|   |            |                            |
|---|------------|----------------------------|
| Statement covers period                 |            | <b>CALIFORNIA FORM 460</b> |
| from                                    | 04/24/2016 |                            |
| through                                 | 05/21/2016 | Page 19 of 22              |
| NAME OF FILER                           |            | I.D. NUMBER                |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                    |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Martin F. Hernandez for Supervisor 2016

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

|   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|--------------------------------|---|---------------------------------------|---|--|
| Netfile<br>Mariposa, CA 95338  | PRO                            | 200.00  | 0.00                                  | 0.00  | 200.00   |
| Trujillo Communications, LLC<br>Los Angeles, CA 90045                  | LIT Stickers                   | 125.40  | 0.00                                  | 0.00  | 125.40   |
| Your PR Girls<br>Ventura, CA 93001                                     | CMP Signs                      | 537.92  | 0.00                                  | 537.92  | 0.00   |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

|                     |          |        |          |        |
|---------------------|----------|--------|----------|--------|
| <b>SUBTOTALS \$</b> | 863.32\$ | 0.00\$ | 537.92\$ | 325.40 |
|---------------------|----------|--------|----------|--------|

**Schedule F Summary**

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$** 2,532.81
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$** 932.50
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 1,600.31  
May be a negative number

**Schedule F  
(Continuation Sheet)  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                 |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                    | 04/24/2016 |                                |
| through                                 | 05/21/2016 | Page 20 of 22                  |
| NAME OF FILER                           |            | I.D. NUMBER                    |
| Martin F. Hernandez for Supervisor 2016 |            | 1378005                        |

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| LT campaign literature and mailings                               | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR<br>DESCRIPTION OF PAYMENT      | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|--|---|---------------------------------------|---|--|
| Sutton Law Firm<br>San Francisco, CA 94108                             | PRO                                    | 0.00  | 2,532.81                              | 0.00  | 2,532.81   |
| Holly Doering<br>Santa Paula, CA 93060                                 | Reimbursement for<br>campaign expenses | 394.58  | 0.00                                  | 394.58  | 0.00   |
| Martin Hernandez<br>Santa Paula, CA 93060                              | FIL Filing fee                         | 1,291.53  | 0.00                                  | 0.00  | 1,291.53   |
| <b>SUBTOTALS \$</b>  |  | <b>1,686.11 \$</b>  | <b>2,532.81 \$</b>                    | <b>394.58 \$</b>  | <b>3,824.34</b>  |

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

|                         |            |                             |
|-------------------------|------------|-----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b>  |
| from                    | 04/24/2016 |                             |
| through                 | 05/21/2016 | Page <u>21</u> of <u>22</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

I.D. NUMBER

1378005

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Trujillo Communications, LLC

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc.                                  | MBR | member communications                     | RAD | radio airtime and production costs                        |
| CNS | campaign consultants  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| U.S. Postal Services<br>Van Nuys, CA 91406                                      | POS  |    |                        | 2,527.00    |
|   |      |    |                        |             |
|   |      |    |                        |             |
|   |      |    |                        |             |
|   |      |    |                        |             |

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 2,527.00

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule I  
Miscellaneous Increases to Cash**

Amounts may be rounded  
to whole dollars.

Statement covers period  
from 04/24/2016  
through 05/21/2016

SCHEDULE I

**CALIFORNIA FORM 460**

Page 22 of 22

I.D. NUMBER  
1378005

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martin F. Hernandez for Supervisor 2016

| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF RECEIPT | AMOUNT OF INCREASE TO CASH |
|---------------|---|------------------------|----------------------------|
|               |   |                        |                            |
|               |   |                        |                            |
|               |   |                        |                            |
|               |   |                        |                            |
|               |   |                        |                            |
|               |   |                        |                            |
|               |   |                        |                            |
|               |   |                        |                            |

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$**

**Schedule I Summary**

|   |                              |
|---|------------------------------|
| 1. Itemized increases to cash this period. ....   | \$ <u>0.00</u>               |
| 2. Unitemized increases to cash of under \$100 this period. ....  | \$ <u>50.00</u>              |
| 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....                            | \$ <u>0.00</u>               |
| 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... | <b>TOTAL \$ <u>50.00</u></b> |