

**Officeholder and Candidate
Campaign Statement –
Short Form**

(Government Code Section 84206)

Type or print in ink.

SHORT FORM

CALIFORNIA
FORM **470**

For Official Use Only

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

11-06-18

Amendment (Explain Below)

Date Stamp

RECEIVED
11/11/18

1. Statement Covers Calendar Year 20 18 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Richard Rollins

STREET ADDRESS

222 Morning Breeze Lane

CITY

Port Hueneme

AREA CODE/DAYTIME PHONE NUMBER

STATE

CA

ZIP CODE

93041

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Port Hueneme City Council

JURISDICTION (LOCATION)

Port Hueneme, CA

DISTRICT NUMBER
(IF APPLICABLE)

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER

NOT YET RECEIVED

COMMITTEE ADDRESS

NAME OF TREASURER

Committee to Elect Rich Rollins for Port Hueneme City Council

222 Morning Breeze Lane, Port Hueneme CA 93041

Beverly Rollins

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$1,000 and that I will spend less than \$1,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

October 31, 2018

DATE

By

Richard Rollins

SIGNATURE OF OFFICEHOLDER OR CANDIDATE

**Officeholder and Candidate
Campaign Statement
Form 470 Supplement**
(Government Code Section 84206)

Type or print in ink.

FORM 470 SUPPLEMENT

CALIFORNIA
FORM **470**
SUPPLEMENT

Amendment (Explain Below)

Date Stamp

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SEE INSTRUCTIONS ON REVERSE

This form is written notification that the officeholder/candidate listed below has received contributions totaling \$1,000 or more or has made expenditures of \$1,000 or more during the calendar year.

1. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Richard Rollins

STREET ADDRESS

222 Morning Breeze Lane

CITY

STATE

ZIP CODE

Port Hueneme

CA

93041

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

310-801-2243

2. Office Sought

OFFICE SOUGHT

Port Hueneme City Council

DISTRICT NUMBER
(IF APPLICABLE)

DATE OF ELECTION (MONTH, DAY, YEAR)

11-06-18

3. Date Contributions Totaling \$1,000 or More Were Received or Date Expenditures of \$1,000 or More Were Made

10-31-2018

(MONTH, DAY, YEAR)