

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

Date of election if applicable: (Month, Day, Year) <u>Nov, 8th 2016</u>	<input type="checkbox"/> Amendment (Explain Below) <hr/> <hr/>
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Date Stamp RECEIVED 2016 OCT 12 PM 4:30 CITY CLERK DEPARTMENT ROSEVILLE, CA	CALIFORNIA FORM 470
For Official Use Only	

1. Statement Covers Calendar Year 20 16

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Phil Ozenick

STREET ADDRESS
350 Diamond Oaks Rd

CITY STATE ZIP CODE
Roseville CA 95678

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Roseville City Council

JURISDICTION (LOCATION)	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	COMMITTEE ADDRESS	NAME OF TREASURER
<u>Phil Ozenick for Roseville City Council, 2016 #1389255</u>	<u>350 Diamond Oaks Dr Roseville, CA 95678</u>	<u>Kevin M. Thomas</u>

5. Verification
I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 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 10/16/16 DATE

By Phil Ozenick SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Clear Form **Print Form**

**Officeholder and Candidate
Campaign Statement -
Form 470 Supplement**

SEE INSTRUCTIONS ON REVERSE

<input type="checkbox"/> Amendment (Explain Below) _____ _____	Date Stamp RECEIVED 2016 OCT 12 PM 4:30 CITY CLERK DEPARTMENT ROSEVILLE, CA	CALIFORNIA FORM 470
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This form is written notification that the officeholder/candidate listed below has received contributions totaling \$2,000 or more or has made expenditures of \$2,000 or more during the calendar year.

1. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE		
Phil Ozenick		
STREET ADDRESS		
350 Diamond Oaks Rd		
CITY	STATE	ZIP CODE
Roseville	CA	95678
AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS	
916 783-9891	philover@aol.com	

2. Office Sought

OFFICE SOUGHT	DISTRICT NUMBER (IF APPLICABLE)
Roseville City Council	
DATE OF ELECTION (MONTH, DAY, YEAR)	
11/08/2016	

3. Date Contributions Totaling \$2,000 or More Were Received or Date Expenditures of \$2,000 or More Were Made

10-03-2016
(MONTH, DAY, YEAR)

Clear Form

Print Form