

Statement of Organization Recipient Committee

STATEMENT OF ORGANIZATION

CALIFORNIA FORM **410**

For Official Use Only

Statement Type Initial Not yet qualified or Amendment List I.D. number # _____ Date qualified as committee _____

Termination - See Part 5 List I.D. number # 1329486 Date of Termination 07/15/2014

Date Stamp
CITY OF DANA POINT
2014 JUL 22 A 10:53
RECEIVED
CITY CLERK'S DEPARTMENT

1. Committee Information

COMMITTEE/FILER'S NAME
Bill Brough For Dana Point City Council 2014

STREET ADDRESS (NO PO BOX)
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
[REDACTED]

MAILING ADDRESS (IF DIFFERENT)

FAX / E-MAIL ADDRESS

COUNTY OF DOMICILE: Orange JURISDICTION WHERE COMMITTEE IS ACTIVE: _____

2. Treasurer and Other Principal Officers

NAME OF TREASURER
Barrett Garcia

STREET ADDRESS
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF PRINCIPAL OFFICER(S)

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

3. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein 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 7/21/14 By [Signature] SIGNATURE OF TREASURER OR ASSISTANT TREASURER

* Executed on 7/21/14 * By [Signature] SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Statement of Organization Recipient Committee

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**CALIFORNIA
FORM 410**

Page 2

I.D. NUMBER
1329486

COMMITTEE NAME
Bill Brough For Dana Point City Council 2014

4. Type of Committee

Controlled Committee

- List the name of each controlling officeholder, candidate or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any and the year of the election.
- List the political party with which each officeholder or candidate is affiliated or check "non-partisan".
- If this committee acts jointly with another controlled committee, list the name and identification of the other controlled committee.

NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	PARTY
William Brough	City Council Member Dana Point	2014	<input checked="" type="radio"/> Non-Partisan
			<input type="radio"/> Non-Partisan

- List the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION Bank Of America	AREA CODE/PHONE NO.	BANK ACCOUNT NUMBER 0729376559
ADDRESS [REDACTED]	CITY [REDACTED]	STATE ZIP CODE [REDACTED]

Primarily Formed Committee

CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO. CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
		SUPPORT	OPPOSE

Statement of Organization Recipient Committee

STATEMENT OF ORGANIZATION

CALIFORNIA
FORM **410**

Page 3

I.D. NUMBER

1329486

COMMITTEE NAME

Bill Brough For Dana Point City Council 2014

4. Type of Committee (Continued)

General Purpose Committee

Not formed to support or oppose specific candidates or measures in a single election.

CITY Committee COUNTY Committee STATE Committee

PROVIDE BRIEF DESCRIPTION OF ACTIVITY

Sponsored Committee

NAME OF SPONSOR

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

ADDRESS

CITY

STATE

ZIP CODE

Small Contributor Committee

_____ Date this committee qualified as a small contributor committee
Date qualified

5. Termination Requirements

By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or proponent certify that all of the following conditions have been met:

- This committee has ceased to receive contributions and make expenditures;
 - This committee does not anticipate receiving contributions or making expenditures in the future;
 - This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
 - This committee has no surplus funds; and
 - This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
- There are restrictions on the disposal of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 -. 89518. and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.

FPPC Form 410 (Dec/2012)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)