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FPPC Form 410 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Statement of Organization Recipient Committee

CALIFORNIA 410

Acolpiciti Committee	
INSTRUCTIONS ON REVERSE	Page 2 of 3
COMMITTEE NAME	I.D. NUMBER
Foley for Mayor 2018	1397432

All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION	AREA CODE/PHONE	BANK ACCOUNT	BANK ACCOUNT NUMBER			
First Foundation Bank	(916)283-8042					
ADDRESS	CITY	STATE	ZIP CODE			
1601 Response Road, Suite 190	Sacramento	CA	95815			

4. Type of Committee Complete the applicable sections.

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 "nonpartisan." Stating "No party preference" is acceptable.
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

ELECTIVE OFFICE SOUGHT OR HELD	YEAR OF	PARTY					
(INCLU	(INCLUDE DISTRICT NUMBER IF APPLICABLE)	ELECTION	CHECK ONE		×		
Mayor: Cit	of Costa Mesa		Nonpartisan X	Partisan	(list political party	/ below)	
			Nonpartisan	Partisan	(list political party	/ below)	
	andidates or measures in a single	e election. List	: below:			CHECK ONE	
ETTER)	CANDIDATE(S) OFFICE SOUGHT O (INCLUDE DISTRICT NO., CI			N	CHEC	K ONE	
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	Mayor: City	(INCLUDE DISTRICT NUMBER IF APPLICABLE) Mayor: City of Costa Mesa	(INCLUDE DISTRICT NUMBER IF APPLICABLE) ELECTION Mayor: City of Costa Mesa	(INCLUDE DISTRICT NUMBER IF APPLICABLE) ELECTION CHECK Mayor: City of Costa Mesa X	(INCLUDE DISTRICT NUMBER IF APPLICABLE) Mayor: City of Costa Mesa Nonpartisan X Nonpartisan Partisan	(INCLUDE DISTRICT NUMBER IF APPLICABLE) Mayor: City of Costa Mesa Nonpartisan X Nonpartisan Partisan (list political party) Nonpartisan Partisan (list political party)	

Statement of Organization Recipient Committee

CALIFORNIA **FORM**

INSTRUCTIONS ON REVERSE

Page 3 of 3 I.D. NUMBER COMMITTEE NAME Foley for Mayor 2018 1397432 4. Type of Committee (Continued) Not formed to support or oppose specific candidates or measures in a single election. Check only one box: General Purpose Committee ☐ COUNTY Committee ☐ STATE Committee ☐ CITY Committee PROVIDE BRIEF DESCRIPTION OF ACTIVITY List additional sponsors on an attachment. Sponsored Committee INDUSTRY GROUP OR AFFILIATION OF SPONSOR NAME OF SPONSOR STATE ZIP CODE AREA CODE/PHONE STREET ADDRESS NO. AND STREET Small Contributor Committee

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 disposition 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.