

Semi-Annual Statement of No Activity



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STATEMENT OF NO ACTIVITY

For use by recipient committees that have not received any contributions and have not made any expenditures during the six-month period covered by a semi-annual statement. **Candidate controlled committees formed for an elective office may not use this form.**

See the Information Manual on Campaign Disclosure Provisions of the Political Reform Act for additional information and information required to be provided to you pursuant to the Information Practices Act of 1977.

Date Stamp

CALIFORNIA FORM **425**

For Official Use Only

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1. Committee Information

I.D. NUMBER
1347394

COMMITTEE NAME

Citizens for Costa Mesa City Charter

STREET ADDRESS (NO P.O. BOX)

2973 Harbor Blvd., #641

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Costa Mesa	CA	92626	949-645-1772

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

220 Nice Lane, #302

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Newport Beach	CA	92663	949-645-1772

OPTIONAL: FAX / E-MAIL ADDRESS

jdcjd@sbcglobal.net

Treasurer(s)

NAME OF TREASURER

Joy D. Cothran

MAILING ADDRESS

220 Nice Lane, #302

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Newport Beach	CA	92663	949-645-1772

NAME OF ASSISTANT TREASURER, IF ANY

William Baber

MAILING ADDRESS

8130 La Mesa Blvd., #202

CITY	STATE	ZIP CODE	AREA CODE/PHONE
La Mesa	CA	91942	619-698-4888

OPTIONAL: FAX / E-MAIL ADDRESS

2. Period of No Activity

No contributions have been received and no expenditures have been made during the period covering the dates below:

Check one of the following boxes and complete the year. January 1, through June 30, 20 12 July 1, through December 31, 20 ____

3. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 information provided is true and correct.

Executed on

7/25/2012
DATE

By

