Statement of Organization Recipient Committee				RECEIVED AND A	CALIFOR FORI		
Statement Type	☐ Initial Not yet qualified ☐ or	Amendment List I.D. number: #	Termination – See Part 5 List I.D. number: #	of the Secretary of the Secretary of the State of California FEB 02 2017	A STATE OF THE PARTY OF THE PAR	Official Use Only AM 8: 23	
1. Committee I	nformation		2. Treasurer and	Other Principal Officers			Distriction of the second of t
Committee 4	6 Elect Peter	De Domenico es	NAIVIE OF TREASURER	adalyse C	1-12		
Ox no-d	(city Clerk	- 2016	STREET ADDRESS (NO P.O. B	OX)			•
	/		CITY 36	63 Belmo	210 000	AREA CODE/PHONE .	a
STREET ADDRESS (NO P.	1 manufactures	00 m . /a		word CA	930	36 /805)485	5-3723
CITY	Corte Pri	ZIP CODE AREA COD	E/PHONE NAME OF ASSISTANT TREAS	URER, IF ANY	and the second s		•
Oxn=	ord CA	93030 (805	7) 479-8090 STREET ADDRESS (NO P.O. B	OX)			
MAILING ADDRESS (IF D	offerent)	menico a gm	2/604	O.N.			
FAX / E-MAIL ADDRESS	ferra, acao	1111	CITY	STATE	ZIP CODE	AREA CODE/PHONE	,
COUNTY OF DOMICILE,	i	HERE COMMITTEE IS ACTIVE	NAME OF PRINCIPAL OFFICE				
			STREET ADDRESS (NO P.O. B	OX)			
Attach additional	l information on appropriat	ely labeled continuation she	city	STATE	ZIP CODE	AREA CODE/PHONE	•
							*
3. Verification I have used all r penalty of perju	reasonable diligence in prepury under the laws of the St	paring this statement and to ate of California that the fo	the best of my knowledge the infor regoing is true and correct.	mation contained herein is trud	e and complete.	I certify under	week,
Executed on	1-31-16 By_	finadal	SIGNATURE OF TREASURER OR ASSISTANT TRE	ASIRER	anne en la company de la compa	4	
Executed on	1 /3 / DATE By	SIGNATU	RE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR ST		Desperanse conference and extensive desired and defended		
Executed on	DATE By	SIGNATU	RE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR ST	TATE MEASURE PROPONENT			
Executed on	построинения в поставления в п						
	DATE	SIGNATU	JRE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR S	TATE MEASURE PROPONENT			

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