| Date qualified as committee Date qualified as committee If committee Information 1. Committee Information Date of Termination 2. Treasure: and Other Principal Officers MAMA OF TRANSPORT TO TRANSPORT ADDRESS (NO PO, BOD) STREET ADDRESS (NO PO, BOD) STREET ADDRESS (NO PO, BOD) STREET ADDRESS (NO PO, BOD) TUTIOCK TUTIOCK CA 95380 MALE RECORD AMEA CODE/PHONE MALE RECORD AMEA CODE/PHONE MALE RECORD AMEA CODE/PHONE TOTY STREET ADDRESS (NO PO, BOD) THE RECORD AMEA CODE/PHONE AMEA CODE/PHONE STREET ADDRESS (NO PO, BOD) THANK STREET ADDRESS (NO PO, BOD) THE RECORD AMEA CODE/PHONE THANK STREET ADDRESS (NO PO, BOD) STREET ADD | Statement of Recipient Cor | Organization nmittee ☐ Initial Not yet qualified ☐ or | Amendment List I.D. number: # 1380213 | Termination – See Par List I.D. number: | 15 | Date Stamp OCT - 3 2016 Office of the City Clerk | | FO | FORNIA 410 For Official Use Only | |
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| Jaime Franco Campaign/ District 2 City Council SINET ADDRESS (NO PO BOX) SINET ADDRESS (NO PO BOX) SINET ADDRESS (NO PO BOX) CITY SIMTE SIMTE SIPCODE AREA CODE/PHONE MALUNG ADDRESS (NO PO BOX) MALUNG ADDRESS (NO PO BOX) TUTIOCK CA 95380 MALUNG ADDRESS (NO PO BOX) FINAL BURGON STATE ADDRESS (NO PO BOX) SIRET ADDRESS (NO PO BOX) TOTIOCK COUNTY OF DEMICIE STATE STATE BP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE BP CODE AREA CODE/PHONE STREET ADDRESS (NO PO BOX) STREET AD | | | | Date of Termination | - | , | • | | | |
| Jaime Franco Campaign/ District 2 City Council Street Address (NO PC BOX) | 1. Committee in | nformation | | 2. Treasure | rand Oth | en Primaisa V | nere. | | | |
| Modesto CA 95381 Turlock CA 95380 PARE CODE/PHONE MALINEA DONESS (IF DIFFERENT) PO Box 27, Turlock, CA 95381 FAX/E-MAIL ADDRESS COUNTY OF DOMICILE COUNTY OF DOMICILE STATE Turlock AREA CODE/PHONE Turlock Turlock AREA CODE/PHONE Turlock Turlock Turlock AREA CODE/PHONE Turlock Turlock Turlock AREA CODE/PHONE Turlock Turl | | Campaign/ District 2 C | ity Council | Ruber | ourer Dina | | 9.116-21S | | | |
| Turlock CA 95380 RAME OF ASSISTANT TREASURER, IF ANY ROdolfo Lezama STREET ADDRESS (IN PROMOTE AND ADDRESS OF DIFFERENT) PO Box 27, Turlock, CA 95381 EAXY FEMALIA ADDRESS COUNTY OF POMICILE COUNTY OF POMICILE STATE JURISDICTION WHERE COMMITTEE IS ACTIVE Turlock STREET ADDRESS (IND PO. BOX) STREET ADDRESS (IND PO. BOX) CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE TO ADDRESS (IND PO. BOX) STREET AD | | | | | | | | | AREA CODE/PHONE | |
| MAILING ADDRESS (IF DIFFERENT) PO Box 27, Turlock, CA 95381 FAX / E-MAIL ADDRESS CITY STATE JURISDICTION WHERE COMMITTEE IS ACTIVE Turlock AREA CODE/PHONE STREET ADDRESS (NO P.O. BOX) Attach additional information on appropriately labeled continuation sheets. STATE 21P CODE AREA CODE/PHONE AREA C | | | · ····c·· cobeji | HONE NAME OF ASSIST | ANT TREASURER, IF | ANY | <u> </u> | 90001 | | |
| FOR Box 27, Turlock, CA 95381 FAX/E-MAIL ADDRESS COUNTY OF DOMICILE Stanislaus JURISDICTION WHERE COMMITTEE IS ACTIVE Turlock STREET ADDRESS (NO P.O. BOX) CITY STATE IP CODE AREA CODE/PHONE AREA CODE/PHONE STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE STATE STATE STATE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE STATE STATE STATE STATE STATE STATE S | | | 380 | Rodolfo | Lezama | | | | | |
| COUNTY OF DOMICILE Stanislaus Turlock Attach additional information on appropriately labeled continuation sheets. Attach additional information on appropriately labeled continuation sheets. CITY STATE ZIP CODE AREA CODE/PHONE Turlock STREET ADDRESS (NO PO. BOX) CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE CITY STATE ZIP CODE AREA C | | | | STREET ADDRESS | (NO PO ROY) | | 7 | | <u> </u> | |
| Stanislaus Turlock STREET ADDRESS (NO PO. BOX) CITY STATE ZIP CODE AREA CODE/PHONE A | FAX / E-MAIL ADDRESS | | | CITY | | , | STATE | ZIP CODE | AREA CODE/PHONE | |
| Attach additional information on appropriately labeled continuation sheets. 3. Werification I have used all reasonable diligence in preparing 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 DATE Executed on DATE By SIGNATURE OF CONTROLLING OF ICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT Executed on DATE By SIGNATURE OF CONTROLLING OF ICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT Executed on DATE By SIGNATURE OF CONTROLLING OF ICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT | | | E COMMITTEE IS ACTIVE | NAME OF PRINCIP | AL OFFICER(S) | | | | | |
| I have used all reasonable diligence in preparing 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 10-5-16 | | | | STREET ADDRESS | (NO P.O. BOX) | | ······································ | | | |
| I have used all reasonable diligence in preparing 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 10-5-16 By SIGNATURE OF TREASURER OR ASSISTANT TREASURER Executed on DATE By SIGNATURE OF CONTROLLING OF ICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT Executed on DATE By SIGNATURE OF CONTROLLING OF ICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT Executed on By SIGNATURE OF CONTROLLING OF ICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT | Attach additional i | information on appropriately | labeled continuation sheets | CITY CITY | | | STATE | ZIP CODE | AREA CODE/PHONE | |
| SIGNATURE OF CONTROLLING DEGLECTION DEGLECTI | I have used all repenalty of perjure the penalty of perjure the penalty of perjure the penalty of perjure the penalty of | DATE By | SIGNATURE O | SIGNATORE OF TREASURER OR ASSIST | STANT TREASURER NTE, OR STATE MEAS | URE PROPONENT URE PROPONENT | rein is tru | e and complete | e. I certify under | |

FPPC Form 410 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov