Statement of Organization Recipient Committee		\$6.00 \$4.00 \$6.00 \$4.00 \$6.00 \$4.00 \$6.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00	Type or print in ink			Date Stamp CALIFORNIA 410				
Statement Type	☑ Initial Not yet qualified ☑ or		Amendment List I.D. number:		☐ Termination – See Part 5 List I.D. number:		CITY OF GULETA CITY CLERK'S OFFICE For Official Use Only			
			**************************************	жения поменения на	#	ONO ASTRUMENTO DE PORTUGUIS ANTICO DE PARA ESTA ANTICO DE PARA EST	2010 AUG 1	0 111	4 44	
	Date qualified as	/	Date qualified as		Date	J e of Termination	AD TÜLÇIYAN GERBA ALARAN BOLDA		se se constituent de	
1. Committee Inf	ormation	akarang mananan manang manang manang mananan ang	gerood entropies operate over Deposit of the material and an extended in	Newson Branch and Control of the Con	4	2. Treasurer and Oth	er Principal Of	ficers		
NAME OF COMMITT	EE	WANTE AND POST OF THE POST OF	ner et en		***************************************	NAME OF TREASURER	OLICEROS CERCISOR POR PERSONAL	WAR STEAM SOURCE STREET, STREE	NICHTER DET GARRESTER DER BERTEITE BERTEITE BERTEITE BERTEITE BERTEITE BERTEITE BERTEITE BERTEITE BERTEITE BER	NI ORI PERIORI EDICENTALINI POR ENVOLUTIONE DE PERIORI PERIORI PERIORI PERIORI PERIORI PERIORI PERIORI PERIORI
PAULA PERO	TTE FOR GOLE	TA CITY CO	UNCIL 2010			ROBERT WIGNOT				**************************************
						STREET ADDRESS (NO P.O	•			
STREET ADDRESS ((NO PO BOX)	economica de estado en estado e	«пистиянальная постанований постанований на постанований на постанований на постанований на постанований на пос Постанований на постанований на постанований на постанований на постанований на постанований на постанований н	TO STATE OF THE ST	**************************************	6155 VERDURA A	√ENUE		310 00 DE	A DEA CODERNONE
						GOLETA		STATE CA	ZIP CODE 93117-2003	AREA CODE/PHONE (805) 964-8166
7847 RIO VIS	IA DRIVE			A property of the control of the con		NAME OF ASSISTANT TRE	ASURER IF ANY	<u> </u>	301117-2000	(003) 304-0100
CITY		STATE	ZIP CODE	AREA CODE/P		NOT APPLICABLE	• •			
GOLETA	ediae, to so de contras estats estats contras estats estats estats estats estats estats estats estats estats e	CA	93117	(805) 886-4	1030	STREET ADDRESS (NO P.C		over the second	demokratisarrang parameter di kili kalandar di Kalandar di Kalandar di Kalandar di Kalandar di Kalandar di Kal	and the state of t
MAILING ADDRESS						·				
	07, GOLETA, C	CA 93118				CITA	un como martiro como en el como e	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX/E	-MAIL ADDRESS									
						NAME OF PRINCIPAL OFFI	CER(S)			
COUNTY OF DOMIC	ILE.	COUNTY WHER	RE COMMITTEE IS A	STIVE IF DIFFEREN	NT	PAULA PEROTTE	mananan manana Tanàna mananan		ranasidram vasidas militis asti vasida kaisas kilki kalen kilki kilki kilki kilki kilki kilki kilki kilki kilk	
SANTA BARB	ADΛ	THEN COOK!	OI DOMINICIEE			STREET ADDRESS (NO P.C	•			
SANTA DAND		<u> </u>			······································	7847 RIO VISTA DI	KIVE	STATE	ZIP CODE	AREA CODE/PHONE
Attach additional in	nformation on approp	riately labeled c	ontinuation sheets.			GOLETA	The state of the s	CA	93117	(805) 886-4636
						ledge the information cor	stained herein is	true and co	emplete. I certify i	under penalty of
Executed on	AUGUST 9		arci nis	Ву		SIGNATURE	FLU GUE	SISTANT TREA	SURER	
Executed on	AUGUST 9	, 2010	. MARIE STATE	Ву	LHOVOLYNGA EELENGAGAN-AANGEN	SIGNATURE OF CONTROLLING	OFFICEHOLDER, CAND	LO HO	TE MEASURE PROPONE	NT
Executed on	DATE	, ,	lamenta arvino	Ву	DOMESTICAL MANAGEMENT CONTROL	SIGNATURE OF CONTROLLING				
Executed on				Ву						
MANUFACTOR OFF	DATE	A CONTRACTOR OF THE PROPERTY O	Berghille.	mr.y		SIGNATURE OF CONTROLLING	OFFICEHOLDER, CANE	IDATE, OR STA	TE MEASURE PROPONE	TM

STATEMENT OF ORGANIZATION Statement of Organization CALIFORNIA **Recipient Committee** FORM INSTRUCTIONS ON REVERSE Page 2 COMMITTEE NAME I.D. NUMBER PENDING PAULA PEROTTE FOR GOLETA CITY COUNCIL 2010 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 "non-partisan." . 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 ELECTION PARTY (INCLUDE DISTRICT NUMBER IF APPLICABLE) NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT X Non-Partisan **GOLETA CITY COUNCIL** 2010 PAULA PEROTTE Non-Partisan • List the financial institution where the campaign bank account is located (controlled "candidate election" committees only) BANK ACCOUNT NUMBER AREA CODE/PHONE NAME OF FINANCIAL INSTITUTION (805) 968-6144 0103208880 SANTA BARBARA BANK & TRUST STATE ZIP CODE ADDRESS CA 93117 7078 MARKETPLACE DRIVE **GOLETA** Primarily formed to support or oppose specific candidates or measures in a single election. List below: Primarily Formed Committee CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)

NOT APPLICABLE

CHECK ONE

OPPOSE

OPPOSE

SUPPORT

SUPPORT

(INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)

Statement of Organization Recipient Committee

# 13 5	101	NA.		
)RN		7. E	128 228 238
				数甲酰
201	WV III			

•	FORM ' ' '		
INSTRUCTIONS ON REVERSE	Page 3		
COMMITTEE NAME	I.D. NUMBER		
PAULA PEROTTE FOR GOLETA CITY COUNCIL 2010	PENDING		
4. Type of Committee (Continued)			
General Purpose Committee Not formed to support or oppose specific candidates or measures in a single election. Check only one box: CITY Committee COUNTY Committee STATE Committee			
PROVIDE BRIEF DESCRIPTION OF ACTIVITY			
NOT APPLICABLE	мицинаран полько прокативомомомомом в положено положено положено положено положено положено положено положено В положено		
Sponsored Committee: List additional sponsors on an attachment.			
NAME OF SPONSOR INDUSTRY GROUP OR AFFILIATION OF SPONSOR	THE RESIDENCE OF THE PROPERTY		
NOT APPLICABLE			
STREET ADDRESS NO. AND STREET CITY STATE ZIP COD	На применения и применения применения применения применения применения применения применения применения примен На применения применени		
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 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.