Statement of Organization
Recipient Committee

Statement Type □ Initial □ Amendment □ Termination – See Part 5
Not yet qualified or
List ID number:
1369133
Date qualified as committee
06/13/2014 Date of Termination
Date qualified as committee (Expired)

1. Committee Information

"Newport Votes NO on Y, with Major Funding by Audrey Steele
Burnand, a concerned citizen against more growth and traffic
in Newport Beach"

NAME OF COMMITTEE

"Newport Votes NO on Y, with Major Funding by Audrey Steele
Burnand, a concerned citizen against more growth and traffic
in Newport Beach"

MAILING ADDRESS (OF DIFFERENT)

FAX/EMAIL ADDRESS

COUNTY OF DOMICILE

INSTRUCTIONS WHERE COMMITTEE IS ACTIVE

Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers

NAME OF TREASURER

STREET ADDRESS (NO PO. BOX)

CITY

STATE ZIP CODE

AREACODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO PO. BOX)

CITY

STATE ZIP CODE

AREACODE/PHONE

NAME OF PRINCIPAL OFFICER(S)

STREET ADDRESS (NO PO. BOX)

CITY

STATE ZIP CODE

AREACODE/PHONE

3. Verification

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 10/14/2014 By

SIGNATURE OF TREASURER OR ASSISTANT TREASURER

SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT

SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPOINENT

SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPOINENT

FPPC Form 410 (Dec/2012)
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