Statement of Organization Recipient Committee	FORM 410
Statement Type Initial Amendment Term  Not yet qualified  or	ination - See Part 5 2017 NOV -2 AM 10: 32 For Official Use Only
O Date qualified as committee ————/-———/-	OFFICE OF  THE CITY CLERK  ONLY OF NEWBORN OF A SECOND
1. Committee Information   I.D. Number (if applicable)	2. Treasurer and Other Principal Officers
NAME OF COMMITTEE  Brenner for City Council 2018	NAME OF TREASURER RICHARD Weaver  STREET ADDRESS (NO P.O. BOX) 202 Nata
street Address (NO P.O. BOX) 615.5 Marguerite Avenue	CITY STATE ZIP CODE AREA CODE/PHONE Newport Beach CA 92660 949/278-2437
CITY         STATE         ZIP CODE         AREA CODE/PHONE           Corona del Mar         CA         92625         949/200-9993	NAME OF ASSISTANT TREASURER, IF ANY
MAILING ADDRESS (IF DIFFERENT) P. O. Box 13251< Newport Beach, CA 92658	STREET ADDRESS (NO P.O. BOX)
E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)  Joy@JoyForNewport.com	CITY STATE ZIP CODE AREA CODE/PHONE
COUNTY OF DOMICILE Orange  JURISDICTION WHERE COMMITTEE IS ACTIVE Newport Beach	NAME OF PRINCIPAL OFFICER(S)  Clyda Joy Brenner, Candidate
	street address (no p.o. box) 615.5 Marguerite
Attach additional information on appropriately labeled continuation sheets.	Corona del Mar CA 92625 949/200-9993
Executed on DATE By SIGNATURE OF CONTROLLING STREET BY SIGNATURE STREET BY SIGNATURE OF CONTROLLING STREET BY SIGNATURE STREET	y knowledge the information contained herein is true and complete. I certify under and correct.  OF TREASURER OR ASSISTANT TREASURER  OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT  OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

FPPC Form 410 (October/2017)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Statement of Organization Recipient Committee						CALIFORNIA 410			
INSTRUCTIONS ON REVERSE						Page 2			
COMMITTEE NAME Brenner for City Council 2018						I.D. NUMBER			
All committees must list the financial institution where the campaign	n bank accoun	t is located.							
NAME OF FINANCIAL INSTITUTION	AREA CO	DE/PHONE BANK ACCOUNT NUMBER							
Bank of America	949/	734-2586	Pendin	g					
ADDRESS	CITY		STATE	Z	P CODE		<del> </del>		
3300 E. Coast Highway	Coror	na del Mar	CA	9	2625				
<ul> <li>List the political party with which each officeholder or candidat</li> <li>If this committee acts jointly with another controlled committee</li> </ul>			number of the oth			PARTY	,		
NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT		(INCLUDE DISTRICT NUMBER IF APPLICABLE)		ELECTION		CKONE			
Clyda Joy Brenner, Candidate		Newport Beach City Councilman District 6			Nonpartisan   ✓	Partisan (list	political party	below)	
					Nonpartisan	Partisan (list	political party	below)	
Primarily Formed Committee Primarily formed to support or	oppose spec	cific candidates or me	asures in a single e	lection. Lis	t below:				
CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR L IF A RECALL, STATE "RECALL" IN FRONT OF THE OFFICEHOLDER'S NAME			(S) OFFICE SOUGHT OR H LUDE DISTRICT NO., CITY			N	CHECK	K ONE	
Clyda Joy Brenner, Candidate		Newport Beach Ci	y Councilman Dis	strict 6			SUPPORT	OPPOSE	
							SUPPORT	OPPOSE	

## CALIFORNIA **Statement of Organization Recipient Committee FORM** INSTRUCTIONS ON REVERSE Page 3 .D. NUMBER COMMITTEE NAME Brenner for City Council 2018 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 ☐ Political Party/Central Committee PROVIDE BRIEF DESCRIPTION OF ACTIVITY Advise, generate support for, and raise funds to elect Clyda Joy Brenner to Newport Beach City Council in 2018 Sponsored Committee List additional sponsors on an attachment. INDUSTRY GROUP OR AFFILIATION OF SPONSOR NAME OF SPONSOR STATE ZIP CODE AREA CODE/PHONE STREET ADDRESS NO. AND STREET

## 5. Termination Requirements

Small Contributor Committee

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;

Date qualified

- 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.

**Clear Page** 

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