Statement of Organization
Recipient Committee

Statement Type
☐ Initial
☐ Not yet qualified
☐ Date qualification threshold met
☒ Amendment
☐ Termination - See Part 5

Date of qualification threshold met
6/9/15
1/2/2020

1. Committee Information

I.D. Number
If applicable)

NAME OF COMMITTEE
Gabriel Kearney for Petaluma City Council 2020

STREET ADDRESS (P.O. BOX) (optional)

CITY
Petaluma
STATE
CA
ZIP CODE
94952
AREA CODE/PHONE

FULL MAILING ADDRESS DIFFERENT

E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)

COUNTY OF DOMICILE
Sonoma

JURISDICTION WHERE COMMITTEE IS ACTIVE
City of Petaluma

2. Treasurer and Other Principal Officers

NAME OF TREASURER
Denise Lewis

STREET ADDRESS (NO P.O. BOX)

CITY
Sacramento
STATE
CA
ZIP CODE
95841
AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, Etc.

STREET ADDRESS (NO P.O. BOX)

CITY
STATE
ZIP CODE
AREA CODE/PHONE

NAME OF PRINCIPAL OFFICERS

STREET ADDRESS (NO P.O. BOX)

CITY
STATE
ZIP CODE
AREA CODE/PHONE

Attach additional information on appropriately labeled continuation sheets.

3. Verification

I have used all reasonable diligence in preparing this report and the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the information contained herein is true and complete.

EXECUTED ON 9/18/2020

By

EXECUTED ON 9/18/2020

By

EXECUTED ON

By

EXECUTED ON

By

EXECUTED ON

By

FPPC Form 410 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/273-3773)
www.fppc.ca.gov

netfile.com
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Recipient Committee

INSTRUCTIONS ON REVERSE

COMMITTEE NAME
Gabe Kearn for Petaluma City Council 2020

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

- Sponsored Committee: List additional sponsors on an attachment.

NAME OF SPONSOR

STREET ADDRESS  RO. AND STREET  CITY  STATE  ZIP CODE  AREA CODE/PHONE

- 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.