Statement of Organization
Recipient Committee

Statement Type
- Amendment
- Initial
- Termination – See Part 5

Not yet qualified or

Date qualified as committee: 07/28/2018

Date qualified as committee:

Date of termination:

NAME OF COMMITTEE
Kevin McDonnell for Petaluma City Council 2018

I.D. Number
1407183

NAME OF TREASURER
Dave Alden

STREET ADDRESS (NO P.O. BOX)
Petaluma, CA 94952

CITY
Sonoma

STREET ADDRESS (NO P.O. BOX)
Petaluma, CA 94952

MAILING ADDRESS (IF DIFFERENT)
Petaluma, CA 94952

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

COUNTY OF DOMICILE
Sonoma

JURISDICTION WHERE COMMITTEE IS ACTIVE
Petaluma

Attach additional information on appropriately labeled continuation sheets.

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 July 30, 2018

By

DATE

Executed on July 30, 2018

By

DATE

Executed on

By

DATE

Executed on

By

DATE

FFPC Form 410 (February/2018)
FFPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
Kevin McDonnell for Petaluma City Council

ALL COMMITTEES MUST LIST THE FINANCIAL INSTITUTION WHERE THE CAMPAIGN BANK ACCOUNT IS LOCATED.

<table>
<thead>
<tr>
<th>NAME OF FINANCIAL INSTITUTION</th>
<th>AREA CODE/PHONE</th>
<th>BANK ACCOUNT NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exchange Bank</td>
<td>707-524-3000</td>
<td>1110060751</td>
</tr>
</tbody>
</table>

ADDRESS: 2 East Washington Street
CITY: Petaluma
STATE: CA
ZIP CODE: 94952

4. **Type of Committee**

- **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 "nonpartisan." Stating "No party preference" is acceptable.
  - If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

<table>
<thead>
<tr>
<th>NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT</th>
<th>ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)</th>
<th>YEAR OF ELECTION</th>
<th>CHECK ONE</th>
<th>PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kevin McDonnell</td>
<td>Petaluma City Council</td>
<td>2018</td>
<td>✔️</td>
<td>Nonpartisan</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Partisan</td>
</tr>
</tbody>
</table>

**Primarily Formed Committee**

Primarily formed to support or oppose specific candidates or measures in a single election. List below:

<table>
<thead>
<tr>
<th>CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER) IF A RECALL, STATE &quot;RECALL&quot; IN FRONT OF THE OFFICEHOLDER'S NAME.</th>
<th>CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)</th>
<th>CHECK ONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>SUPPORT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

FPPC Form 410 (February/2018)

FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
**Statement of Organization**

**Recipient Committee**

**INSTRUCTIONS ON REVERSE**

**COMMITTEE NAME**
Kevin McDonnell for Petaluma City Council 2018

**I.D. NUMBER**
1407183

---

**4. Type of Committee** (Continued)

<table>
<thead>
<tr>
<th>General Purpose Committee</th>
<th>Not formed to support or oppose specific candidates or measures in a single election. Check only one box:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ CITY Committee</td>
<td>☐ COUNTY Committee</td>
</tr>
</tbody>
</table>

**PROVIDE BRIEF DESCRIPTION OF ACTIVITY**

**Sponsored Committee**
List additional sponsors on an attachment.

<table>
<thead>
<tr>
<th>NAME OF SPONSOR</th>
<th>INDUSTRY GROUP OR AFFILIATION OF SPONSOR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STREET ADDRESS</th>
<th>NO. AND STREET</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.

---

**Clear Page**  **Print**