☐ Initia Not yet qualified ☐ or	Amendment List I.D. number:	Termination – See Pa	arts	EIV EI	F	or Official Use Only
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Date qualified as committee		Date of Termination		CLERY		
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O. 80X)		cmy Petalui	ma	STATE CA S	ZIP CODE 94952	Area Code/Phone
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information on appropriately	labeled continuation sheets	CITY		STATE	ZIP CODE	AREA CODE/PHONE
easonable diligence in prepar ry under the laws of the State DATE By	Treasses S	oing)s true and correct.			and complete	. I certify under
	INFORMATION OFFICE CA 94: FFERENT) JURISDICTION WHER information on appropriately easonable diligence in prepari	offormation OFFOW STATE ZIP CODE AREA CODE/PL CA 94955 FFERENT) JURISDICTION WHERE COMMITTEE IS ACTIVE information on appropriately labeled continuation sheets easonable diligence in preparing this statement and to the	INTEREST ADDRESSION OF PRINCIPLE IS ACTIVE STATE ZIP CODE AREA CODE/PHONE NAME OF ASS	Date qualified as committee Information OFFOW 2. Treasurer and Other Principal NAME OF TREASURER Gregory S. Reisinger STREET ADDRESS (NO P.O. BOX) OFFORM STATE ZIP CODE AREA CODE/PHONE CA 94955 FFERENT) JURISDICTION WHERE COMMITTEE IS ACTIVE INCOMPANDED INFORMATION ON APPRINCIPAL OFFICER(S) STREET ADDRESS (NO P.O. BOX) CITY Petaluma NAME OF ASSISTANT TREASURER, IF ANY CITY NAME OF PRINCIPAL OFFICER(S) STREET ADDRESS (NO P.O. BOX) CITY CITY Information on appropriately labeled continuation sheets. CITY CITY	Date qualified as committee (ft applicable) Date qualified as committee (ft applicable) Date of Termination 2. Treasurer and Other Principal Officers NAME OF TREASURER Gregory S. Reisinger STREET ADDRESS (NO P.O. BOX) CITY STATE Petaluma CA STREET ADDRESS (NO P.O. BOX) CITY STATE JURISDICTION WHERE COMMITTEE IS ACTIVE NAME OF PRINCIPAL OFFICER(S) STREET ADDRESS (NO P.O. BOX) CITY STATE NAME OF PRINCIPAL OFFICER(S) STREET ADDRESS (NO P.O. BOX) CITY STATE Passonable diligence in preparing this statement and to the best of my knowledge the information contained herein is true by under the laws of the State of talifornia that the foregoing is true and correct. Day Allow By Allow Allows	Date qualified as committee (ff applicable) Date qualified as committee (ff applicable) Date of Termination 2. Treasurer and Other Principal Officers NAME OF TREASURER Gregory S. Reisinger STATE ZIP CODE CA 94955 AREA CODE/PHONE AREA CODE/PHONE JURISDICTION WHERE COMMITTEE IS ACTIVE Date of Termination 2. Treasurer and Other Principal Officers NAME OF TREASURER Gregory S. Reisinger STATE ZIP CODE CA 94952 NAME OF ASSISTANT TREASURER, IF ANY CITY STATE ZIP CODE NAME OF PRINCIPAL OFFICERIS) STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE Information on appropriately labeled continuation sheets. CITY STATE ZIP CODE Date of Termination CITY STATE ZIP CODE CITY STATE ZIP CODE Date of Termination STATE ZIP CODE CITY STATE ZIP CODE Date of Termination CIT

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