Statement of Organization
Recipient Committee

Statement Type
☐ Initial
☐ Amendment
☐ Termination – See Part 5
Not yet qualified or List I.D. number:
#
1381974
Termination – See Part 5
List I.D. number:
#
1381974
Date of Termination
12/31/2016

1. Committee Information
NAME OF COMMITTEE
Miller for City Council 2016

STREET ADDRESS (NO P.O. BOX)
Petaluma

CITY
Petaluma, CA 94954

STATE
ZIP CODE
94954

AREA CODE / PHONE

MAILING ADDRESS (IF DIFFERENT)
Petaluma, CA 94955

FAX/EMAIL ADDRESS

COUNTY OF DOMICILE
Sonoma

JURISDICTION WHERE COMMITTEE IS ACTIVE
Petaluma

Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers
NAME OF TREASURER
Kathleen C. Miller

STREET ADDRESS (NO P.O. BOX)
Petaluma

CITY
Petaluma, CA 94954

STATE
ZIP CODE
94954

AREA CODE / PHONE

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO P.O. BOX)

CITY

STATE

ZIP CODE

AREA CODE / PHONE

NAME OF PRINCIPAL OFFICER(S)

STREET ADDRESS (NO P.O. BOX)

CITY

STATE

ZIP CODE

AREA CODE / 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 01/31/2017
By Kathleen C. Miller
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 01/31/2017
By Kathleen C. Miller
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, OR STATE MEASURE PROONENT

FPPC Form 410 (Jan/2016)
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