**Statement of Organization**
**Recipient Committee**

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

**Initial Information**
- Date qualification threshold met: 7/15/20

**1. Committee Information**
- **NAME OF COMMITTEE**
  - Brian Barnacle for Petaluma City Council 2020

**2. Treasurer and Other Principal Officers**
- **NAME OF TREASURER**
  - Dan Ellecamp
- **STREET ADDRESS (NO P.O. BOX)**
  - Petaluma, CA 94952
- **NAME OF ASSISTANT TREASURER, IF ANY**
  - **STREET ADDRESS (NO P.O. BOX)**
  - **NAME OF PRINCIPAL OFFICER**
  - Brian Barnacle
  - **STREET ADDRESS (NO P.O. BOX)**

**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 this is true and correct.

**Executed on**
- 7/20/20

**By**
- [Redacted]

**TREASURER**
- Signature of Treasurer or Assistant Treasurer

**Candidate**
- Signature of Controlling Officeholder, Candidate, or State Measure Proponent

**CALIFORNIA FORM 410**
For Official Use Only

**RECEIVED**
- JUL 23 2020
- CITY CLERK

**ATTACH ADDITIONAL INFORMATION ON APPROPRIATELY LABELED CONTINUATION SHEETS.**
Statement of Organization Recipient Committee

**INSTRUCTIONS ON REVERSE**

**COMMITTEE NAME**
Brian Barnacle for Petaluma City Council 2020

- All committees must list the financial institution where the campaign bank account is located.

<table>
<thead>
<tr>
<th>BANK or FINANCING INSTITUTION</th>
<th>AREA CODE/PHONE</th>
<th>BANK ACCOUNT NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Redwood Credit Union</td>
<td>7075454000</td>
<td>1100000654913</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Petaluma</td>
<td>CA</td>
<td>94952</td>
</tr>
</tbody>
</table>

4. **Type of Committee** Complete the applicable section.

**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 PROONENT</th>
<th>ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)</th>
<th>YEAR OF ELECTION</th>
<th>PARTY</th>
<th>CHECK ONE</th>
<th>(list political party below)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brian Barnacle</td>
<td>Petaluma City Council</td>
<td>2020</td>
<td>Nonpartisan</td>
<td></td>
<td>Dem</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) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
</table>

FPPC Form 410 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov