



# Statement of Organization Recipient Committee

INSTRUCTIONS ON REVERSE

COMMITTEE NAME Citizens for a Sustainable Economy Political Action Committee, For Athas for City Council 2017, Sponsored by Novato Chamber of Commerce	I.D. NUMBER 1397266
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- All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION Bank of San Francisco	AREA CODE/PHONE (415) 744-6700	BANK ACCOUNT NUMBER [REDACTED]	
ADDRESS 575 Market Street #900	CITY San Francisco	STATE CA	ZIP CODE 94105

### 4. Type of Committee Complete the applicable sections.

**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."
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	PARTY
			<input type="checkbox"/> Nonpartisan
			<input type="checkbox"/> Nonpartisan

**Primarily Formed Committee**

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

CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
		SUPPORT	OPPOSE

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Recipient Committee**

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**COMMITTEE NAME**

Citizens for a Sustainable Economy Political Action Committee, For Athas for City Council 2017, Sponsored by Novato Chamber of Commerce

**I.D. NUMBER**

1397266

**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**

To educate and influence Novato voters about issues that affect a sustainable economy

**Sponsored Committee**

List additional sponsors on an attachment.

**NAME OF SPONSOR**

Novato Chamber of Commerce

**INDUSTRY GROUP OR AFFILIATION OF SPONSOR**

Chamber of Commerce

**STREET ADDRESS**

**NO. AND STREET**

**CITY**

**STATE**

**ZIP CODE**

807 DeLong Avenue

Novato

CA

94945

**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.