Statement of Organization
Recipient Committee

Statement Type  ☑ Amendment
Not yet qualified  ☐ tf

☐ Amendment  List I.D. number:
# 1393232

☐ Termination - See Part 5
List I.D. number:
#

02/03/2017  Date qualified as committee
(Date of organization)

1. Committee Information

NAME OF COMMITTEE
Jeff Lee for Grover Beach Mayor 2018
(formerly Jeff Lee for Grover Beach Mayor 2020)

STREET ADDRESS (NO P.O. BOX)

CITY  STATE  ZIP CODE
Grover Beach  CA  93433

PO Box 257 Grover Beach, CA 93483

COUNTY OF ORIGIN
San Luis Obispo

JURISDICTION WHERE COMMITTEE IS ACTIVE
City of Grover Beach

2. Treasurer and Other Principal Officers

NAME OF TREASURER
Lori Sterling

STREET ADDRESS (NO P.O. BOX)
Pismo Beach

CITY  STATE  ZIP CODE
CA  93449

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 1/28/18
By

Executed on 1/27/2018
By

Executed on
By

Executed on
By

CALIFORNIA FORM 410
For Official Use Only

Date Stamp
City of Grover Beach
JAN 30 2018
RECEIVED

FPPC Form 410 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
ywww.fppc.ca.gov
**Statement of Organization**  
**Recipient Committee**

**INSTRUCTIONS ON REVERSE**

**COMMITTEE NAME:**  
Jeff Lee for Grover Beach Mayor 2018  
(formerly Jeff Lee for Grover Beach Mayor 2020)

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

**NAME OF FINANCIAL INSTITUTION**  
Pacific Western Bank

**AREA CODE/PHONE**  
(605)541-9200

**BANK ACCOUNT NUMBER**  
1091538931

**ADDRESS**  
1001 Marsh Street

**CITY**  
San Luis Obispo

**STATE**  
CA

**ZIP CODE**  
93401

**TYPE OF COMMITTEE:** Complete the applicable sections.

**Controlled Committee**

- List the names of each controlling officer, holder, 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.

<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>
</tr>
</thead>
<tbody>
<tr>
<td>Jeff Lee Mayor, City of Grover Beach</td>
<td></td>
<td>2018</td>
<td>☐ Nonpartisan not applicable</td>
</tr>
<tr>
<td>not applicable</td>
<td>not applicable</td>
<td></td>
<td>☐ Nonpartisan not applicable</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)</th>
<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>
<tbody>
<tr>
<td>not applicable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>not applicable</td>
<td></td>
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Statement of Organization
Recipient Committee

INSTRUCTIONS ON REVERSE

COMMITTEE NAME
Jeff Lee for Grover Beach Mayor 2018
(formerly Jeff Lee for Grover Beach Mayor 2020)

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

not applicable

Sponsored Committee
List additional sponsors on an attachment.

NAME OF SPONSOR
not applicable

INDUSTRY GROUP OR AFFILIATION OF SPONSOR
not applicable

STREET ADDRESS
not applicable

CITY State ZIP CODE
not applicable

Small Contributor Committee
not applicable

5. Termination Requirements
By signing the certification, the treasurer, assistant treasurer, and/or candidate, officer, or principal certificate 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.