Statement of Organization
Recipient Committee

Statement Type
☐ Initial
☐ Amendment
☐ Termination – See Part E

Date qualified as committee
Date of termination

1. Committee Information

NAME OF COMMITTEE
Chirco for Los Alamitos City Council 2018

I.D. Number

2. Treasurer and Other Principal Officers

NAME OF TREASURER
Mark Chirco

STREET ADDRESS (NO P.O. BOX)

CITY
Los Alamitos

STATE
CA

ZIP CODE
90720

NAME OF ASSISTANT TREASURER, IF ANY
N/A

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 2/2/18
By

Executed on 2/7/18
By

Signature of Controlling Officer, Candidate, or State Measure Propponent

FPPC Form 410 (October/2017)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### California Form 410

**Committee Name**
Chirco for Los Alamitos City Council 2018

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

<table>
<thead>
<tr>
<th>NAME OF FINANCIAL INSTITUTION</th>
<th>AREA CODE/PHONE</th>
<th>BANK ACCOUNT NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 4. Type of Committee
**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 (INCLUDING DISTRICT NUMBER IF APPLICABLE)</th>
<th>YEAR OF ELECTION</th>
<th>PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mark Chirco</td>
<td>Los Alamitos City Council</td>
<td>2018</td>
<td>Nonpartisan ✔ Ptisan (list political party below)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>CHECK ONE</th>
<th>PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Nonpartisan</td>
<td>Ptisan (list political party below)</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 IF A RECALL, STATE &quot;RECALL&quot; IN FRONT OF THE OFFICEHOLDER'S NAME)</th>
<th>CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)</th>
<th>CHECK ONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A - not a primarily formed committee</td>
<td></td>
<td>SUPPORT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>
### 4. Type of Committee (Continued)

<table>
<thead>
<tr>
<th>General Purpose Committee</th>
<th>Not formed to support or oppose specific candidates or measures in a single election. Check only one box:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY Committee</td>
<td>☐</td>
</tr>
<tr>
<td>COUNTY Committee</td>
<td>☐</td>
</tr>
<tr>
<td>STATE Committee</td>
<td>☐</td>
</tr>
<tr>
<td>Political Party/Central Committee</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Provide Brief Description of Activity**

N/A - not a general purpose committee

<table>
<thead>
<tr>
<th>Sponsored Committee</th>
<th>List additional sponsors on an attachment.</th>
</tr>
</thead>
</table>

**Name of Sponsor**

N/A - not a sponsored committee

<table>
<thead>
<tr>
<th>Street Address</th>
<th>No. and Street</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Area Code/Phone</th>
</tr>
</thead>
</table>

**Small Contributor Committee**

☐ Date qualified

### 5. Termination Requirements

- 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.

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- 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.