Statement of Organization Recipient Committee			Type or	print in ink			R!	ECEI	VED	STATE MEN	NT OF ORGANIZATION
. co.p.c oo							-11	IAM 1 R	P2:28	FOR	
Statement Type 🔀 Initial Not yet qualified 🗌 or		,				Termination – See Part 5				Park to the second	Official Use Only
							CIT	CITY CL	SADENA		
			*		#		C	LULIA	ONDERM		
	01 18 Date qualified as co	11 mmittee	Date qualified a	s committee	Dat	J e of Termination					
1. Committee Inf	ormation					2. Treasurer and C	Other Pr	incipal O	fficers		
NAME OF COMMITT	EE .					NAME OF TREASURE	ER				
Gaylaird Chris	stopher for School	Board 2011				Greg Stephens					
	,					STREET ADDRESS (NO)			
						1736 La Cresta	Drive				
STREET ADDRESS	(NO P.O. BOX)					CITY			STATE	ZIP CODE	AREA CODE/PHONE
1131 Heathers	side Road					Pasadena			CA	91103-1213	626-798-0227
CITY		STATE	ZIP CODE	AREA CODE	/PHONE	NAME OF ASSISTANT	TREASURE	R, IF ANY			
Pasadena		CA	91105	626-722-7	7887						
MAILING ADDRESS	(IF DIFFERENT)					STREET ADDRESS (NO	10 P.O. BOX)			
626-628-3624	Gaylairdc@sbcgl		E COMMITTEE IS A	CTIVE IF DISSESS	CNT	CITY NAME OF PRINCIPAL (OFFICER(S)	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles		THAN COUNTY		CTIVE IF DIFFER	.6141	STREET ADDRESS (NO	10 P.O. BOX)			
Attach additional in	nformation on appropri	ately labeled co	ontinuation sheets			CITY			STATE	ZIP CODE	AREA CODE/PHONE
	easonable diligence a laws of the State o	f California th				A SIGNATURE OF CONTROLL SIGNATURE OF CONTROLL	LLING OFFICE	HOLDER, CAN	ASSISTANT TREA IDIDATE, OR STA IDIDATE, OR STA IDIDATE, OR STA	SURER TE MEASURE PROPON TE MEASURE PROPON TE MEASURE PROPON FPP	EN" .

Statement of Organization Recipient Committee

CALIFORNIA 41
FORM INSTRUCTIONS ON REVERSE Page 2 COMMITTEE NAME I.D. NUMBER Gaylaird Christopher for School Board 2011

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 "non-partisan."
- . 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	(INC	CLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	ON PARTY
Gaylaird Christopher	Pasadena	School Board Member No. 6	Board Member No. 6 2011	
				Non-Partisan
 List the financial institution where the campaign bank account is l 	located (control	led "candidate election" committees on	ly)	
NAME OF FINANCIAL INSTITUTION	AREA (CODE/PHONE SANK A	CCOUNT NUMBER	
Citizens Business Bank	(626)	405-4915 2542	14515	
ADDRESS	CITY	STATE	ZIP CODE	
1010 East Colorado Blvd.,	Pasa	dena CA	91106	
Primarily Formed Committee Primarily formed to support or oppose	se specific candid	ates or measures in a single election. List t	pelow:	
CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. C	OR LETTER)	CANDIDATE(S) OFFICE SOUGHT OR HE (INCLUDE DISTRICT NO., CITY O		OTION CHECK ONE
		,		SUPPORT OPPOSE
		-1		SUPPORT OPPOSE
				i

FPPC Form 410 (June/09) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

STATEMENT OF ORGANIZATION

STATEMENT OF ORGANIZATION Statement of Organization **Recipient Committee** CALIFORNIA 1 ORM INSTRUCTIONS ON REVERSE COMMITTEE NAME I.D. NUMBER 4. Type of Committee (Continued) 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 Sponsored Committee List additional sponsors on an attachment. NAME OF SPONSOR INDUSTRY GROUP OR AFFILIATION OF SPONSOR STREET ADDRESS NO. AND STREET ZIP CODE 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.

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