

**Statement of Organization  
Recipient Committee**

Statement Type  Initial  Amendment  Termination - See Part 5  
 Not yet qualified or  Date qualified as committee \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 08 / 28 / 2018 Date qualified as committee \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Date of termination

CITY CLERK  
MORENO VALLEY  
RECEIVED  
18 SEP 25 PM 1:42  
RECEIVED AND FILED  
in the office of the Secretary of State  
of the State of California  
SEP 06 2018  
CALIFORNIA FORM 410  
For Official Use Only  
REGISTRAR OF VOTERS  
COUNTY OF RIVERSIDE

<b>1. Committee Information</b>		<b>I.D. Number</b> (if applicable) 1409842		<b>2. Treasurer and Other Principal Officers</b>			
NAME OF COMMITTEE Elect David Marquez for Mayor 2018		NAME OF TREASURER Radene Hiers		STREET ADDRESS (NO P.O. BOX) [REDACTED]			
STREET ADDRESS (NO P.O. BOX) [REDACTED]		CITY Moreno Valley		STATE CA	ZIP CODE 92551	AREA CODE/PHONE [REDACTED]	
CITY Moreno Valley		STATE CA		ZIP CODE 92551		AREA CODE/PHONE [REDACTED]	
MAILING ADDRESS (IF DIFFERENT) n/a		NAME OF ASSISTANT TREASURER, IF ANY n/a		STREET ADDRESS (NO P.O. BOX) n/a			
E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL) [REDACTED]		CITY n/a		STATE	ZIP CODE	AREA CODE/PHONE	
COUNTY OF DOMICILE Riverside		JURISDICTION WHERE COMMITTEE IS ACTIVE City of Moreno Valley		NAME OF PRINCIPAL OFFICER(S) Nina Hiers, Chair			
				STREET ADDRESS (NO P.O. BOX) [REDACTED]			
				CITY Moreno Valley	STATE CA	ZIP CODE 92551	AREA CODE/PHONE [REDACTED]

Attach additional information on appropriately labeled continuation sheets.

**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 information provided is true and complete.  
 Executed on 9/20/18 By [REDACTED] ct.  
 Executed on 8-28-18 By [REDACTED] SIGNATURE OF TREASURER OR ASSISTANT TREASURER  
 Executed on \_\_\_\_\_ By \_\_\_\_\_ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT  
 Executed on \_\_\_\_\_ By \_\_\_\_\_ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT  
 Executed on \_\_\_\_\_ By \_\_\_\_\_ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

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Recipient Committee**

INSTRUCTIONS ON REVERSE

COMMITTEE NAME <b>Elect David Marquez for Mayor 2018</b>	I.D. NUMBER <b>1409842</b>
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• All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION <b>U. S. Bank</b>	AREA CODE/PHONE <b>9512429347</b>	BANK ACCOUNT NUMBER <b>[REDACTED]</b>	
ADDRESS <b>25900 Iris Ave.</b>	CITY <b>Moreno Valley</b>	STATE <b>CA</b>	ZIP CODE <b>92551</b>

**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." 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.

NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	CHECK ONE		PARTY (list political party below)
			Nonpartisan	Partisan	
David Marquez	Moreno Valley City Mayor	2018	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

**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) IF A RECALL, STATE "RECALL" IN FRONT OF THE OFFICEHOLDER'S NAME.	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
		SUPPORT	OPPOSE
n/a		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

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INSTRUCTIONS ON REVERSE

**CALIFORNIA  
FORM 410**

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COMMITTEE NAME

Elect David Marquez for Mayor 2018

I.D. NUMBER

1409842

**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  Political Party/Central Committee

PROVIDE BRIEF DESCRIPTION OF ACTIVITY

n/a

**Sponsored Committee**

List additional sponsors on an attachment.

NAME OF SPONSOR

n/a

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

STREET ADDRESS

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE/PHONE

n/a

**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.

**Clear Page**

**Print**