

**Statement of Organization
Recipient Committee**

Statement Type Initial

Not yet qualified
or

Date qualified as committee
08 / 21 / 2018

Amendment

Date qualified as committee
/ /

Termination - See Part 5

Date of termination
/ /

**CALIFORNIA 410
FORM**

For Official Use Only

RECEIVED

SEP 10 2018

CITY CLERK

Date Stamp
RECEIVED AND FILE
in the office of the Secretary of State
of the State of California

AUG 24 2018

2. Treasurer and Other Principal Officers

1. Committee Information

I.D. Number 1406456
(if applicable)

NAME OF COMMITTEE

Jerry Jones for City Council 2018

NAME OF TREASURER

Jerrold L Jones

STREET ADDRESS (NO P.O. BOX)

AREA CODE/PHONE

CITY

STATE

CA

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

ZIP CODE

91945

STATE

CA

CITY

Lemon Grove

MAILING ADDRESS (IF DIFFERENT)

AREA CODE/PHONE

CITY

STATE

CA

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

ZIP CODE

91945

STATE

CA

CITY

Lemon Grove

E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)

councilmanjones@gmail.com

COUNTY OF DOMICILE

San Diego

JURISDICTION WHERE COMMITTEE IS ACTIVE

City of Lemon Grove

CITY

STATE

CA

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

ZIP CODE

91945

STATE

CA

CITY

Lemon Grove

NAME OF PRINCIPAL OFFICER(S)

[REDACTED]

AREA CODE/PHONE

[REDACTED]

CITY

[REDACTED]

STATE

CA

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

ZIP CODE

91945

STATE

CA

CITY

Lemon Grove

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.

Executed on 8/21/2018 By [REDACTED]

Executed on 8/21/2018 By [REDACTED]

Executed on _____ By _____

Executed on _____ By _____

Executed on _____ By _____

Executed on _____ By _____

Executed on _____ By _____

Executed on _____ By _____

ASSISTANT TREASURER

CANDIDATE, OR STATE MEASURE PROponent

CANDIDATE, OR STATE MEASURE PROponent

SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, OR STATE MEASURE PROponent

[REDACTED]

**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

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I.D. NUMBER

1406456

COMMITTEE NAME

Jerry Jones for City Council 2018

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

NAME OF FINANCIAL INSTITUTION

Union Bank

AREA CODE/PHONE

619-667-3000

BANK ACCOUNT NUMBER

0100455269

ADDRESS

3285 Lemon Grove Ave

CITY

Lemon Grove

STATE

CA

ZIP CODE

91945

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 PROONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	CHECK ONE		PARTY (list political party below)
			Nonpartisan	Partisan	
Jerry Jones	Lemon Grove City Council	2018	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(list political party below)
			<input type="checkbox"/>	<input type="checkbox"/>	(list political party below)

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
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>