

**Statement of Organization
Recipient Committee**

Statement Type

| | | |
|--|------------------------------------|---|
| <input type="checkbox"/> Initial | <input type="checkbox"/> Amendment | <input type="checkbox"/> Termination – See Part 5 |
| <input type="checkbox"/> Not yet qualified or <input checked="" type="checkbox"/> Date qualification threshold met | Date qualification threshold met | Date of termination |
| 08 / 08 / 24 | _____ / _____ / _____ | _____ / _____ / _____ |

Date Stamp

CALIFORNIA FORM 410
For Official Use Only
MORENO VALLEY CLERK
'24 AUG 9 PM 5:07

1. Committee Information I.D. Number (if applicable) 2. Treasurer and Other Principal Officers

NAME OF COMMITTEE
Campaign of Justin Jackson for Moreno Valley City Council District 3, 2024

STREET ADDRESS (NO P.O. BOX)
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
Moreno Valley CA 92555 [REDACTED]

FULL MAILING ADDRESS (IF DIFFERENT)
[REDACTED]

E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)
[REDACTED]

COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE
Riverside Moreno Valley

Attach additional information on appropriately labeled continuation sheets.

NAME OF TREASURER
Camila Quino

STREET ADDRESS (NO P.O. BOX)
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
Moreno Valley CA 92555 [REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF PRINCIPAL OFFICER(S)

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

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 08/09/2024 By [REDACTED] SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 08/09/24 By [REDACTED] 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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CALIFORNIA FORM 410

For Official Use Only

| 1. Committee Information | | | | I.D. Number (if applicable) | | | | 2. Treasurer and Other Principal Officers | | | |
|---|--|---|--|-----------------------------------|--|------------------------------|-------------------|--|--|-------------------------------------|--|
| NAME OF COMMITTEE Campaign of Justin Jackson for Moreno Valley City Council District 3, 2024 | | | | NAME OF TREASURER Camila Quino | | | | STREET ADDRESS (NO P.O. BOX) [REDACTED] | | | |
| STREET ADDRESS (NO P.O. BOX) [REDACTED] | | | | CITY Moreno Valley | | STATE CA | ZIP CODE 92555 | AREA CODE/PHONE [REDACTED] | | NAME OF ASSISTANT TREASURER, IF ANY | |
| FULL MAILING ADDRESS (IF DIFFERENT) [REDACTED] | | | | CITY Moreno Valley | | STATE CA | ZIP CODE 92555 | AREA CODE/PHONE [REDACTED] | | STREET ADDRESS (NO P.O. BOX) | |
| E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL) [REDACTED] | | | | CITY Moreno Valley | | STATE CA | ZIP CODE 92555 | AREA CODE/PHONE [REDACTED] | | CITY | |
| COUNTY OF DOMICILE Riverside | | JURISDICTION WHERE COMMITTEE IS ACTIVE Moreno Valley | | NAME OF PRINCIPAL OFFICER(S) | | STREET ADDRESS (NO P.O. BOX) | | CITY | | STATE | |
| Attach additional information on appropriately labeled continuation sheets. | | | | CITY | | STATE | ZIP CODE | AREA CODE/PHONE | | CITY | |
| | | | | CITY | | STATE | ZIP CODE | AREA CODE/PHONE | | CITY | |

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 | 08/09/2024 | By | [REDACTED] | SIGNATURE OF TREASURER OR ASSISTANT TREASURER |
| | DATE | | | |
| Executed on | 08/09/24 | By | [REDACTED] | SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT |
| | DATE | | | |
| Executed on | _____ | By | _____ | SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT |
| | DATE | | | |
| Executed on | _____ | By | _____ | SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT |
| | DATE | | | |

**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

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| | |
|--|-------------|
| COMMITTEE NAME Campaign of Justin Jackson for Moreno Valley City Council District 3, 2024 | I.D. NUMBER |
|--|-------------|

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

| | | | |
|--|-----------------------|---------------------|-------------------|
| NAME OF FINANCIAL INSTITUTION US Bank | AREA CODE/PHONE | BANK ACCOUNT NUMBER | |
| ADDRESS 25900 Iris Ave. | CITY Moreno Valley | STATE CA | ZIP CODE 92555 |

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 | PARTY CHECK ONE | | |
|--|---|------------------|---|-----------------------------------|------------------------------|
| Justin Jackson | City Council | 24 | <input checked="" type="checkbox"/> Nonpartisan | <input type="checkbox"/> Partisan | (list political party below) |
| | | | <input type="checkbox"/> Nonpartisan | <input type="checkbox"/> Partisan | (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 |
| | | | |
| | | | |

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INSTRUCTIONS ON REVERSE

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COMMITTEE NAME

Campaign of Justin Jackson for Moreno Valley City Council District 3, 2024

I.D. NUMBER

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

Sponsored Committee

List additional sponsors on an attachment.

NAME OF SPONSOR

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

STREET ADDRESS

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Small Contributor Committee

____/____/____

Date qualified

5. Termination Requirements

By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or ponent 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.