					RECI	EIVED		
Statement of Recipient Cor				16		CLERK 6 AN IO:		FORNIA 410
Statement Type	Initial Not yet qualified or	Amendment List (.D. number:	Termination – See Part List I.D. number:			6 AN 10: Carso		For Official Use Only
		#_1385753	#				***	
	Date qualified as committee	06 13 201 Date qualified as committee (If applicable)	Date of Termination	-				
1. Committee li	nformation	i i grafiana a irrafia	2. Treasure		ner Princip	oal Officers		nei(f) il 2
Good Governr	ment Carson		David G	omez				
			333 E. A	Albertoni	St., No. 2	200, Ste. 4	132	
STREET ADDRESS (NO P.O			CITY			STATE	ZIP CODE	AREA CODE/PHONE
	ni St., No. 200, Ste. 43	32	Los Ang			CA	90746	(661)435-9973
CITY	STATE	ZIP CODE AREA CODE/PI		ANT TREASURER, I	IF ANY			
Carson	CA 90	746 (661)435-						
MAILING ADDRESS (IF D	IFFERENT)		STREET ADDRESS	(NO P.O. BOX)				
FAX / E-MAIL ADDRESS	NAMES OF THE OWNER OWNER OF THE OWNER OWN		CITY	***		STATE	ZIP CODE	AREA CODE/PHONE
img8198@msr	n.com		" (
COUNTY OF DOMICILE		IE COMMITTEE IS ACTIVE	NAME OF PRINCI	PAL OFFICER(S)				
Los Angeles	Carson		David G	omez				
			STREET ADDRESS					
			333 E. A	Albertoni	St., No. 2	200, Ste. 4	132	
Attach additional	information on appropriately	Inheled continuation sheets	CITY			STATE	ZIP CODE	AREA CODE/PHONE
, maon additionar	mjormation on appropriately	raberea continuación snects	Carson			CA	90746	(661)435-9973
3. Verification I have used all rependity of perjue	easonable diligence in prepar iry under the laws of the State 6/27/16 By	ing this statement and to the of California that the foreg	e best of my knowledge the oing is true and correct. SIGNATURE OF TREASURER OR ASS			d herein is t	rue and comp	lete. I certify under
Executed on	5/27/10 By_	And &						
Formula di co	DAI %	SIGNATURE O	F CONTROCTÍNG OFFICEHOLDER, CANDII	DATE, OR STATE M	EASURE PROPONE	NT		
Executed on	DATE By	SIGNATURE O	F CONTROLLING OFFICEHOLDER, CANDIL	DATE, OR STATE M	EASURE PROPONE	NT		
Executed on	Ву							
	DATE	SIGNATURE C	F CONTROLLING OFFICEHOLDER, CANDI	DATE, OR STATE M	EASURE PROPONE	ENT		FPPC Form 410 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

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All committees must list the financial institution where the campaign ba	nk account is located.			
NAME OF FINANCIAL INSTITUTION	AREA CODE/PHONE	BANK ACCOUN	T NUMBER	
California Bank & Trust	(213)228-1700			
ADDRESS	CITY	STATE	ZIP CODE	
550 S. Hope St., Ste. 100	Los Angeles	CA	90071	
List the name of each controlling officeholder, candidate, or state a district number, if any, and the year of the election. List the political party with which each officeholder or candidate is If this committee acts jointly with another controlled committee, I	s affiliated or check "nonpartisar	n." number of the othe		
				Nonpartisan
				Nonpartisan
Primarily Formed Committee CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETT	CANDIDATE(S) OFFICE SOUGHT OR HE	ection. List below: LD OR MEASURE(S) JURISDICTIO R COUNTY, AS APPLICABLE)	N CHECK ONE SUPPORT OPPOSE SUPPORT OPPOSE

Statement of Organization **Recipient Committee**

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Good Government Carson

1385753

4: Type of Committe	e (Continued)					
General Purpose Comm	action prescribed and control of the second	o support or oppose specific can mittee	ndidates or measures in a single ele ee	ction. Check	only one box:	
PROVIDE BRIEF DESCRIPTION OF ACTIV	TITY					
Support or oppose	local candidates.					
Sponsored Committee	List additional spon	sors on an attachment.				
NAME OF SPONSOR			INDUSTRY GROUP OR AFFILIATION OF SPONSOR			
STREET ADDRESS N	IO. AND STREET	CITY		STATE	ZIP CODE	
Small Contributor Comn		ate qualified				

5. Termination Requirements

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