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15 JUL -7 AM 11:31
CITY OF CARSON

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DATE STAMP
 CALIFORNIA
 FORMS
 410
 For Official Use Only

Statement of Organization Recipient Committee

Statement Type Initial Amendment
 Not yet qualified or Termination - See Part 5
 List I.D. number: _____ List I.D. number: _____

Date qualified as committee _____ Date of termination _____
 (if applicable)

NAME OF COMMITTEE: **ALBERT NOBLE for Mayor 2017**

NAME OF TREASURER: **Gary Cromlett**

STREET ADDRESS (NO P.O. BOX): **525 N. Beaulieu Way, #101-C**

CITY: **Long Beach, CA 90802**

STATE: **CA** ZIP CODE: **90802** AREA CODE/PHONE: **562-993-8915**

NAME OF FINANCIAL OFFICER: _____

STREET ADDRESS (NO P.O. BOX): _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

NAME OF FINANCIAL OFFICER: _____

STREET ADDRESS (NO P.O. BOX): _____

CITY: _____ STATE: _____ ZIP CODE: _____ AREA CODE/PHONE: _____

Attach additional information on appropriately labeled continuation sheets.

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 04/28/2015 By _____
 DATE SIGNATURE OF CONTROLLER OR CLERK OR ASSISTANT TREASURER

Executed on 04/28/2015 By _____
 DATE SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURES PROPOSITOR

Executed on _____ By _____
 DATE SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURES PROPOSITOR

Executed on _____ By _____
 DATE SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURES PROPOSITOR

**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

CALIFORNIA FORM 410
2 of 3
I.D. NUMBER

COMMITTEE NAME
Albert Robles for Mayor 2017

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

NAME OF FINANCIAL INSTITUTION California Bank & Trust	AREA CODE/PHONE 213-228-1700	BANK ACCOUNT NUMBER [REDACTED]
ADDRESS 550 S. Hope St., #100	CITY Los Angeles	STATE ZIP CODE CA 90071

- 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."
- 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
Albert Robles	City of Carson Mayor	2017	<input checked="" type="checkbox"/> Nonpartisan
			<input type="checkbox"/> Nonpartisan

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)	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"/>

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Statement of Organization Recipient Committee

INSTRUCTIONS ON REVERSE

CALIFORNIA FORM 410	
1 of 3	
ID NUMBER	

COMMITTEE NAME
Albert Robles for Mayor 2017

[REDACTED]

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

[REDACTED]

List additional sponsors on an attachment.

NAME OF SPONSOR		INDUSTRY GROUP OR AFFILIATION OF SPONSOR		
STREET ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE
[REDACTED]				

Other qualified

[REDACTED]

- 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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