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Statement of Organization Recipient Committee

Type or print in ink

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STATEMENT OF ORGANIZATION

Statement Type [X] Initial Not yet qualified [X] or

[] Amendment List I.D. number: #

[] Termination - See Part 5 List I.D. number: #

Date qualified as committee

Date qualified as committee (If applicable)

Date of Termination

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1. Committee Information

NAME OF COMMITTEE: Dorina Padilla, Oxnard City Council, 2012. STREET ADDRESS: 2935 Fournier ST, Oxnard, CA 93033. COUNTY OF DOMICILE: Ventura.

2. Treasurer and Other Principal Officers

NAME OF TREASURER: Dorinamarie Padilla. STREET ADDRESS: 2935 Fournier ST, Oxnard, CA 93033. NAME OF ASSISTANT TREASURER, IF ANY: [Blank].

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 September 10, 2012. Executed on September 10, 2012. Executed on [Blank]. Executed on [Blank].

By [Signature] SIGNATURE OF TREASURER OR ASSISTANT TREASURER. By [Signature] SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT.

**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

COMMITTEE NAME
Dorina Padilla, Oxnard City Council, 2012

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 "non-partisan."
- 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
Dorinamarie Padilla	City Council	2012	<input checked="" type="checkbox"/> Non-Partisan
			<input type="checkbox"/> Non-Partisan

- List the financial institution where the campaign bank account is located (controlled "candidate election" committees only)

NAME OF FINANCIAL INSTITUTION Chase	AREA CODE/PHONE (805) 777-1699	BANK ACCOUNT NUMBER 119062020
ADDRESS 1678 N. Moorpark Rd	CITY Thousand Oaks	STATE ZIP CODE CA 91360

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)	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
		SUPPORT	OPPOSE