

Statement of Organization  
Recipient Committee

Statement Type

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

1. Committee Information

I.D. Number  
(if applicable)

1266026

NAME OF COMMITTEE

Committee to Elect Tony Beall  
City Council, 2020

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE  
RANCHO SANTA MARGARITA CA 92688 949 433-5821

FULL MAILING ADDRESS (IF DIFFERENT)

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

tbeall@cityofrsm.org

COUNTY OF DOMICILE

Orange

JURISDICTION WHERE COMMITTEE IS ACTIVE

City of Rancho Santa Margarita

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 that the foregoing is true and correct.

Executed on 01/17/24 By Tony Beall SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 01/17/24 By Tony Beall SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, OR STATE MEASURE PROPOUNDER

Executed on \_\_\_\_\_ By \_\_\_\_\_ SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, OR STATE MEASURE PROPOUNDER

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of the State of California  
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JAN 22 2024  
R JAN 24 2024  
BY: \_\_\_\_\_