

**Statement of Organization  
Recipient Committee**

Date Stamp

**CALIFORNIA  
FORM**

**410**

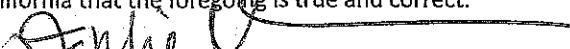
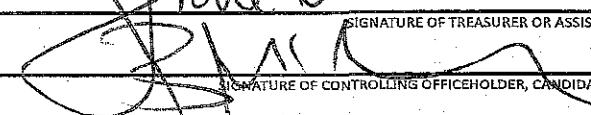
For Official Use Only

Statement Type	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Termination – See Part 5
	<input type="radio"/> Not yet qualified or		Date of termination
	<input type="radio"/> Date qualification threshold met	Date qualification threshold met	
		11 / 21 / 13	

<b>1. Committee Information</b>		<b>I.D. Number</b> (if applicable)	<b>2. Treasurer and Other Principal Officers</b>		
NAME OF COMMITTEE  Brad McGirr for RSM City Council 2022		NAME OF TREASURER  Julie McGirr			
STREET ADDRESS (NO P.O. BOX)  [REDACTED]		CITY  Rancho Santa Margarita	STATE  CA	ZIP CODE  92688	AREA CODE/PHONE  (949) 858-1147
CITY  Rancho Santa Margarita	STATE  CA	ZIP CODE  92688	AREA CODE/PHONE  (949) 858-1147	NAME OF ASSISTANT TREASURER, IF ANY	
FULL MAILING ADDRESS (IF DIFFERENT)		STREET ADDRESS (NO P.O. BOX)			
E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)  brad@mcgirr.com		CITY	STATE	ZIP CODE	AREA CODE/PHONE
COUNTY OF DOMICILE  Orange	JURISDICTION WHERE COMMITTEE IS ACTIVE  Rancho Santa Margarita		NAME OF PRINCIPAL OFFICER(S)		
		STREET ADDRESS (NO P.O. BOX)			
		CITY	STATE	ZIP CODE	AREA CODE/PHONE
<i>Attach additional information on appropriately labeled continuation sheets.</i>					

**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	5/16/22	By		SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on	5/16/22	By		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPOSERNT
Executed on		By		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPOSERNT
Executed on		By		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPOSERNT

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COMMITTEE NAME Brad McGirr for RSM City Council 2022		I.D. NUMBER 1349825	
<ul style="list-style-type: none"> <li>• All committees must list the financial institution where the campaign bank account is located.</li> </ul>			
NAME OF FINANCIAL INSTITUTION Schools First Federal Credit Union	AREA CODE/PHONE (714) 258-4000	BANK ACCOUNT NUMBER [REDACTED]	
ADDRESS [REDACTED]	CITY Santa Ana	STATE CA	ZIP CODE 92706

**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 PROONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	PARTY CHECK ONE		
			Nonpartisan	Partisan	(list political party below)
Brad McGirr	Rancho Santa Margarita City Council	2022	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(list political party below)
			<input type="checkbox"/>	<input checked="" type="checkbox"/>	(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
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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I.D. NUMBER  
1349825

COMMITTEE NAME Brad McGirr for RSM City Council 2022	
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**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, orponent 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.