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Torrance

# Statement of Organization Recipient Committee

Statement Type  Initial  Not yet qualified  or

Amendment  Termination - See Part 5  
List I.D. number: \_\_\_\_\_ List I.D. number: \_\_\_\_\_

# CITY OF TORRANCE 1362109  
CITY CLERK'S OFFICE 06 / 06 / 14  
Date qualified as committee Date qualified as committee (if applicable) Date of Termination

RECEIVED

2014 AUG 11 AM 10:36

RECEIVED AND FILED  
in the office of the Secretary of State  
of the State of California

JUN 16 2014

Date Stamp

CALIFORNIA FORM 410

For Official Use Only  
2014 JUN 23 PM 4:00  
CAMPAIGN FINANCE DISCLOSURE SECTION

NAME OF COMMITTEE  
**Gina Semana 4 City Clerk 2014**

STREET ADDRESS (NO P.O. BOX)  
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE  
**Torrance CA 90501 [REDACTED]**

MAILING ADDRESS (IF DIFFERENT)  
\_\_\_\_\_

FAX / E-MAIL ADDRESS  
[REDACTED]

COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE  
**Los Angeles** \_\_\_\_\_

NAME OF TREASURER  
**Helen A. Nowatka**

STREET ADDRESS (NO P.O. BOX)  
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE  
**Torrance CA 90501 [REDACTED]**

NAME OF ASSISTANT TREASURER, IF ANY  
**Gina Semana**

STREET ADDRESS (NO P.O. BOX)  
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE  
**Torrance CA 90501 [REDACTED]**

NAME OF PRINCIPAL OFFICER(S)  
\_\_\_\_\_

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 6/9/14 By \_\_\_\_\_  
DATE

Executed on 6/9/14 By \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_ By \_\_\_\_\_  
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

Executed on \_\_\_\_\_ By \_\_\_\_\_  
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT