

**Statement of Organization
Recipient Committee**

Statement Type

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

Date Stamp

CALIFORNIA FORM 410

For Official Use Only

1. Committee Information I.D. Number

(if applicable)

NAME OF COMMITTEE
Vanessa Quiroz-Carter for City Council 2021

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

CITY STATE ZIP CODE AREA CODE/PHONE
Watsonville CA 95076 (831) 713 8628

2. Treasurer and Other Principal Officers

NAME OF TREASURER
Yolanda Rosebraugh

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

CITY STATE ZIP CODE AREA CODE/PHONE
Watsonville CA 95076 (831) 840 0654

NAME OF ASSISTANT TREASURER, IF ANY
Vanessa Quiroz-Carter

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

CITY STATE ZIP CODE AREA CODE/PHONE
Watsonville CA 95076 (831) 713 8628

NAME OF PRINCIPAL OFFICER(S)
Vanessa Quiroz-Carter

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

CITY STATE ZIP CODE AREA CODE/PHONE
Watsonville CA 95076 (831) 713 8628

COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE
Santa Cruz City of Watsonville

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 09/25/2021 By [Signature] SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 09/25/2021 By [Signature] NAME OF PRINCIPAL OFFICER(S), CANDIDATE, OR STATE MEASURE PROPONENT

Executed on 09/25/2021 By [Signature] NAME OF PRINCIPAL OFFICER(S), CANDIDATE, OR STATE MEASURE PROPONENT

Executed on 09/25/2021 By [Signature] SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

FPPC Form 410 (August/2018)
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