

**Statement of Organization
Recipient Committee**

FILED
SANTA CRUZ CO ELECTION

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

Date Stamp
JAN 16 2019

CALIFORNIA FORM 410
For Official Use Only

2019 JAN 28 PM 2: 32
Date of termination
01 / 14 / 2019

Statement Type

Initial
 Not yet qualified
or
 Date qualification threshold met

Amendment
Date qualification threshold met

Termination - See Part 5
Date of termination
01 / 14 / 2019

1. Committee Information **I.D. Number** 1276172 **2. Treasurer and Other Principal Officers**

NAME OF COMMITTEE
Scotts Valley Town Center Now

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

CITY **STATE** **ZIP CODE** **AREA CODE/PHONE**
Scotts Valley CA 95066 (831) 419-1701

FULL MAILING ADDRESS (IF DIFFERENT)

E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)
epseib@sbcglobal.net

COUNTY OF DOMICILE **JURISDICTION WHERE COMMITTEE IS ACTIVE**
Santa Cruz City of Scotts Valley

NAME OF TREASURER
Eric P. Seib

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

CITY **STATE** **ZIP CODE** **AREA CODE/PHONE**
Scotts Valley CA 95066 (831) 234-3322

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO P.O. BOX)

CITY **STATE** **ZIP CODE** **AREA CODE/PHONE**

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.

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 1-14-19 By [Signature]
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

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

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