Statement of C				Date Stamp RECEIVED	CALIFOR	PROPERTY A SEE IN SECTION
Recipient Com	ımıttee			NEOLIVED		
Statement Type	☐ Initial		▼ Termination – See Part 5		For	Official Use Only
	O Not yet qualified or			JAN 3 0 2023		
	O Date qualification threshold met	Date qualification threshold met	Date of termination	City Clerk's Office		
	//	09 / 27 / 2022	12 / 28 / 2022	City of Laguna Beach CA		
1. Committee In	formation I.D. Number (if applicable		2. Treasurer and	Other Principal Office	rs	
NAME OF COMMITTEE			NAME OF TREASURER	COCHORAGO P C CAT THE STOCK AND		
Laguna 2022. Sup	porting Blake and Opposing	Flores and Orgill for	Stacy Owens			
Laguna Beach Cit	y Council 2022.		STREET ADDRESS (NO P.O. BOX)		AND THE RESERVE TO SERVE THE PARTY OF THE PA	
			312 Clay Street S	uite 300		
STREET ADDRESS (NO P.O	. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
312 Clay Street	Suite 300		Oakland	CA	94607	(510)423-4300
CITY	STATE ZIP C	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER	R, IF ANY		
Oakland	CA	94607 (510) 423-43	300 Peter Sullivan			
FULL MAILING ADDRESS (STREET ADDRESS (NO P.O. BOX)			
			312 Clay Street S			
E-MAIL ADDRESS (REQUIR	RED) / FAX (OPTIONAL)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
filings@seowensc	ompany.com		Oakland	CA	94607	(510)423-4300
COUNTY OF DOMICILE	JURISDICTION WHERE COL	MMITTEE IS ACTIVE	NAME OF PRINCIPAL OFFICER(S)	Management (Sector assessment assessment assessment assessment assessment assessment assessment assessment ass		
Alameda County	Laguna Beach		Samuel Goldstein			
	NAME OF THE OWNER, WHEN THE PARTY OF THE OWNER, WHEN THE OWNER, WHEN THE OWNER, WHEN THE OWNER, WHEN THE OWNER,		STREET ADDRESS (NO P.O. BOX)			
			1999 South Coast			
المعادية المعادلة الم	information on appropriately lab	alad continuation sheets	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Attach adaitionai	information on appropriately lab	ielea continuation sneets.	Laguna Beach	CA	92651	(510)423-4300
penalty of perju	easonable diligence in preparing ry under the laws of the State of 12/28/2022 ByBy	California that the foregoing	st of my knowledge the informa is true and correct.		e and complete.	I certify under
Executed on	DATE By	SIGNATURE OF CONT	FROLLING OFFICEHOLDER, CANDIDATE, OR STATE	MEASURE PROPONENT	And the second section and proportion and the	
Executed on	DATE By	SIGNATURE OF CONT	FROLLING OFFICEHOLDER, CANDIDATE, OR STATE	MEASURE PROPONENT		
Executed on	DATE By	SIGNATURE OF CON	TROLLING OFFICEHOLDER, CANDIDATE, OR STATE	E MEASURE PROPONENT	FPPC	Form 410 (August/2018)
				FPPC Ac		c.ca.gov (866/275-3772) www.fppc.ca.gov

netfile.com

Statement of Organization Recipient Committee

INSTRUCTIONS ON REVERSE

COMMITTEE NAME

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I.D. NUMBER

1454453

Laguna 2022. Supporting Blake and Opposing Flores and Orgill for Laguna Beach City Council 2022.

NAME				NAME			
Cindy Shopoff							
MAILING ADDRESS			, , , , , , , , , , , , , , , , , , , ,	MAILING ADDRESS			
1999 South Coast Hwy ste 5							
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Laguna Beach	CA	92651	(510) 423-4300				
NAME				NAME			
Michael Ray							
MAILING ADDRESS				MAILING ADDRESS			
1999 South Coast Hwy ste 5							
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Laguna Beach	CA	92651	(510) 423-4300				
NAME				NAME			
MAILING ADDRESS				MAILING ADDRESS			
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
					, , , , , , , , , , , , , , , , , , , ,		
NAME				NAME			, m, e, p, e,
MAILING ADDRESS				MAILING ADDRESS			
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE

Statement of Organization Recipient Committee

CALIFORNIA 410

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NSTRUCTIONS ON REVERSE	Page 3 ⊃£ 5
OMMITTEE NAMÉ	I.O. NUMBER
Laguna 2022. Supporting Blake and Opposing Flores and Orgill for Laguna Beach City Council 2022.	1454453

All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION	AREA CODE/PHONE	BANK ACCOUNT	NUMSER	
First Republic Bank	(510) 530-8881		5891	
ADDRESS	CITY	STATE	ZIP CODE	
2110 Mountain Boulevard	Oakland	CA	94611	

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 PROPONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	PAR CHECK		
			Nonpartisan	Partisan	(list political party below)
			Nonpartisan	Partisan	(list political party below)

Primarily Formed Committee: Primarily formed to support or oppose specific candidates or measures in a single election. List below:

IF A RECALL, STATE "RECALL" IN FRONT OF THE OFFICEHOLDER'S NAME.	(INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK	ONE
Peter Blake	City Council Member City of Laguna Seach	SUPPORT X	OPPOSE
Ruben Flores	city Council Member City of Laguna Reach	SUPPORT	GPPOSE .∕.

CANDIDATEIS OFFICE CONCUT OF HELD OF MEASUREIS HIRISDICTION

Statement of Organization Recipient Committee

Primarily Formed Committee

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COMMITTEE NAME

Laguna 2022. Supporting Blake and Opposing Flores and Orgill for Laguna Beach City Council 2022.

1454453

CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHEC SUPPORT	CK ONE OPPOSE
Mark Orgill	City Council Member City of Laguna Beach		×

Primarily formed to support or oppose specific candidates or measures in a single election. List below

Statement of Organization Recipient Committee

california 410

INSTRUCTIONS ON REVERSE

COMMITTEE NAME

I.D. NUMBER

Page 5 of 5

Laguna 2022. Supporting Blake and Opposing Flores and Orgill for Laguna Beach City Council 2022.

1454453

	Committee Not formed to supplemental Not formed Not for	port or oppose specific candidates or meas COUNTY Committee			
OVIDE BRIEF DESCRIPTION C	OF ACTIVITY				
Sponsored Commit	ttee List additional sponsors c	on an attachment.			
ME OF SPONSOR		INDUSTRY GROUP OR AFF	ILIATION OF SPONSOR		
REET ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE/PHONE

5. Termination Requirements

By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or proponent 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.