Semi-Annual Statement of No Activity

Type or print in ink

STATEMENT OF NO ACTIVITY

Date Stamp CALIFORNIA **FORM** For use by recipient committees that have not received any contributions and have not made any expenditures For Official Use Only during the six-month period covered by a semi-annual statement. Candidate controlled committees formed for an elective office may not use this form. See the Information Manual on Campaign Disclosure Provisions of the Political Reform Act for additional information and information required to be provided to you pursuant to the Information Practices Act of 1977. **GITY CLERK DEPARTMENT**

1. Committee Information 1294524	Treasurer(s)
COMMITTEE NAME	Charles Mann
Save San Clemente Open Space. STREET ADDRESS (NO P.O. BOX)	30240 Rancho Viejo Rd, Ste A CITY STATE ZIP CODE AREA CODE/PHONE
30240 Rancho Vicio Rd, Ste 17 CITY STATE ZIP CODE AREA CODE/PHONE	San Juan Capistrano, CA 92675
San Juan Capistrano, CA 92675 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET	MAILING ADDRESS
CITY STATE ZIP CODE AREA CODE/PHONE	CITY STATE ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	OPTIONAL: FAX/E-MAIL ADDRESS
2. Period of No Activity	
No contributions have been received and no expenditures have been made do	
Check one of the following boxes and complete the year.	1, through June 30, 20 July 1, through December 31, 20
3. Verification	
I have used all reasonable diligence in preparing this statement. I have reviewe true and complete. I certify under penalty of perjury under the laws of the State	ed the statement formation contained herein is e of California that
Executed on	By
	FPPC Form 425 (Jan/01)

FPPC Toll-Free Helpline: 866/ASK-FPPC

866/275-3772