For use by recipient committees that have not received any contributions and have not made any expenditures during the six-month period covered by a semi-annual statement. Candidate controlled committees formed for an elective office may not use this form.		Date Stamp City of San Clemente	CALIFORNIA 425	
			FEB 0 2 2021	For Official Use Only
See the Information Manual on Campaign Disclosure Provi and information required to be provided to you pursuant to			City Clerk Department	
1. Committee Information	1.D. NUMBER 1312003	Treasurer(s)		
COMMITTEE NAME		NAME OF TREASURER		
VISION SAN CLEMENTE A COMMITTEE FORMEI HINKLE FOR SAN CLEMENT CITY COUNCIL 2019		JERI M MAILING ADDRESS	NNA	
OTDEST ADDRESS WAS BOLDON		30240 RANCHO VIEJO RD., STE. A		
STREET ADDRESS (NO P.O. BOX) 30240 RANCHO VIEJO RD., STE. A		city SAN JUAN CAPO		CODE AREA CODE/PHONE
CITY STATE ZIP COL	DE AREA CODE/PHONE	AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY		
SAN JUAN CAPISTRANO CA 92675				
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET		MAILING ADDRESS		
CITY STATE ZIP COL	E AREA CODE/PHONE	CITY	STATE ZIP (CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAI	LADDRESS	
2. Period of No Activity				
No contributions have been received and no expe	nditures have been made durir	og the ne riod cov ering th	e dates below:	
				gh December 31, 20
Check one of the following boxes and complete	e the year	, through June 30, 20 _	W Suly 1, through	gii December 31, 20
3. Verification				
I have used all reasonable diligence in preparing t is true and complete. I certify under penalty of pe				information contained herein
Executed on		By GN.	ATURE OF TREASURER/ASSISTANT TREA	ASURER

Semi-Annual Statement of No Activity

Type or print in ink.

FPPC Form 425 (Jan/01) FPPC Toll-Free Helpline: 866/ASK-FPPC 866/275-3772

STATEMENT OF NO ACTIVITY