Semi-Annual Statement of No Activity			Type or print in ink.	STATEMENT OF NO ACTIVITY	
				Date Stamp	CALIFORNIA 425
For use by recipient committees that have no during the six-month period covered by a sen elective office may not use this form. See the Information Manual on Campaign Distant information required to be provided to you	i-annual statemen	t. Candidate controlled co	mmittees formed for an or additional information	JAN 27 2022	For Official Use Only
	Lin	NUMBER		City Clerk Department	
. Committee Information		3021	Treasurer(s)		
COMMITTEE NAME			NAME OF TREASURER		
WATCHDOG FOR SAN CLEMENTE RESPONSIBLE GOVT - A COMMITTEE FORMED TO OPPOSE DAN BANE FOR CITY COUNCIL 2018			JERI MANN		
			MAILING ADDRESS		
			63 VIA PICO PLAZA	STE 113	
STREET ADDRESS (NO P.O. BOX)			CITY		CODE AREA CODE/PHONE
63 VIA PICO PLAZA STE 113			SAN CLEMENTE	CA 92	672
CITY ST	ATE ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TRE	ASURER, IF ANY	
SAN CLEMENTE CA	92672				
MAILING ADDRESS (IF DIFFERENT) NO. AND ST	REET		MAILING ADDRESS		
CITY ST.	ATE ZIP CODE	AREA CODE/PHONE	CITY	STATE ZIP	CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS			OPTIONAL: FAX/E-MAIL	ADDRESS	
. Period of No Activity					
No contributions have been received	and no expendito	ures have been made dur	ing the period covering the	dates below:	
Check one of the following boxes a			1, through June 30, 20		ugh December 31, 20
. Verification			3		
I have used all reasonable diligence is true and complete. I certify under p	n preparing this se enalty of perjury	statement. I have reviewe under the laws of the Sta	ed the statement and to the te of California that the for	best of my knowledge the egoing is true and correct.	e information contained hereir
Executed on 1126/2022 DATE				TTRE	EASURER
					FPPC Form 425 (Jan/0

FPPC Toll-Free Helpline: 866/ASK-FPPC 866/275-3772

STATEMENT OF NO ACTIVITY