

**Statement of Organization
Recipient Committee**

Statement Type

<input type="checkbox"/> Initial	<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Termination – See Part 5
<input type="radio"/> Not yet qualified or <input type="radio"/> Date qualification threshold met	Date qualification threshold met	Date of termination
____/____/____	____/____/____	12, 31, 22

Date Stamp
City of San Clemente
FEB 15 2023
City Clerk Department

CALIFORNIA FORM 410
For Official Use Only

1. Committee Information		I.D. Number (if applicable)	2. Treasurer and Other Principal Officers			
NAME OF COMMITTEE		1454112	NAME OF TREASURER			
Thor Johnson for San Clemente City Council 2022			Thor Johnson			
STREET ADDRESS (NO P.O. BOX)			STREET ADDRESS (NO P.O. BOX)			
[REDACTED]			[REDACTED]			
CITY	STATE		CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Clemente	CA		San Clemente	CA		[REDACTED]
FULL MAILING ADDRESS (IF DIFFERENT)			NAME OF ASSISTANT TREASURER, IF ANY			
E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)			STREET ADDRESS (NO P.O. BOX)			
COUNTY OF DOMICILE	JURISDICTION WHERE COMMITTEE IS ACTIVE		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 12/31/22 By [REDACTED]
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 12/31/22 By [REDACTED]
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