1. Committee	Initial  Not yet qualified or  Date qualification threshold met	Amendment  Date qualification threshold me	✓ Termination – See Part t Date of termination	PECEIVED AND FIL he office of the Secretary of softhe State of California  FEB 0 3 2023	Star FO	ORNIA RM 410 For Official Use Only
1. Committee	Initial  Not yet qualified or  Date qualification threshold met			the office of the Secretary of 5 of the State of California	Star FO	
1. Committee	O Not yet qualified or Date qualification threshold met			of the State of California		For Official Use Only
Committee       NAME OF COMMITTEE	or  Date qualification threshold met //	Date qualification threshold me	t Date of termination	FEB 0 3 2023		
1. Committee	// Information I.D. Number	Date qualification threshold me	t Date of termination	1 10 0 0 2023		
NAME OF COMMITTEE		//				
NAME OF COMMITTEE		/	12 21 22			
NAME OF COMMITTEE			12 / 31 / 22			
	(i) applicable)	1450726	2. Treasurer an	d Other Principal Officer	'S	
Mike Pasquale for			NAME OF TREASURER			32 EXAMPLE 50 AB
Mike Pasquale for Yuba City Council 2022			Mike Pasquale			
			STREET ADDRESS (NO P.O. BOX			
			5 THE STREET (NO 1.0. BOX			
STREET ADDRESS (NO P.O. BOX	X)					
			THAINE OF ASSISTANT THEASUR	EK, IF ANY		
FULL MAILING ADDRESS (IF DI	IFFERENT)		STREET ADDRESS (NO P.O. BOX)			
E-MAIL ADDRESS (REQUIRED) /	/ FAY (ORTIONAL)					
pasquoza@yahoo.co			CITA	STATE	ZIP CODE	AREA CODE/PHONE
COUNTY OF DOMICILE	JURISDICTION WHERE COM	AITTEE IS ACTIVE				
Sutter	Yuba city	HITTEE IS ACTIVE	NAME OF PRINCIPAL OFFICER(S	5)		
	T dou city		STREET ADDRESS IN C. C. C.			
			STREET ADDRESS (NO P.O. BOX)			
Attach additional in	formation on appropriately lab	alad a series of the series	CITY	STATE		
ittaen adamona mj	јотпистоп от арргорпасету тад	elea continuation sheets.	785	SIAIE	ZIP CODE	AREA CODE/PHONE
3. Verification	TOTAL PROPERTY AND ADDRESS.			Name of the Control o		
have used all reason	anabla dilinana i					
penalty of periury u	onable diligence in preparing the state of Countries of C	ols statement and to the bes	t of my knowledge the informa	ation contained herein is true	and complete	. I certify under
1-25.2	and or the ottate of c	allorina titav tile loregoing	s true and correct	>		
Executed on	DATE By	The fight	THAT HOLD OF TOTAL	-		
Executed on 1-25-23	- Ru ////	11/18/11	GNATURE OF TREASURER OR ASSISTANT TREASU	JRER		
X	DATE BY 10/	SIGNATURE OF CONTR	ROLLING OFFICEHOLDER, CANDIDATE, OR STATE	MEASURE PROPONENT		
Executed on	DATE By					
		SIGNATURE OF CONTR	OLLING OFFICEHOLDER, CANDIDATE, OR STATE	MEASURE PROPONENT		
xecuted on	DATE By		OLLING OFFICEHOLDER, CANDIDATE, OR STATE			

FPPC Form 410 (August/2018)
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www.fppc.ca.gov