

**Statement of Organization
Recipient Committee**

Date Stamp

**CALIFORNIA
FORM 410**

For Official Use Only

Statement Type

<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Termination – See Part 5
<input type="radio"/> Not yet qualified or <input type="radio"/> Date qualification threshold met _____/_____/_____	Date qualification threshold met 12 / 01 / 2023	Date of termination _____/_____/_____

1. Committee Information		I.D. Number		2. Treasurer and Other Principal Officers			
		1464366 <i>(if applicable)</i>		NAME OF TREASURER Albany Aroyan			
NAME OF COMMITTEE Affordable Redwood City 2024 Sponsored by Faith in Action Bay Area		STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	
				San Francisco	CA	94107	
STREET ADDRESS (NO P.O. BOX)		EMAIL ADDRESS OF TREASURER (REQUIRED)		AREA CODE/PHONE			
CITY	STATE	ZIP CODE	AREA CODE/PHONE				
San Francisco	CA	94107					
FULL MAILING ADDRESS (IF DIFFERENT)		NAME OF ASSISTANT TREASURER, IF ANY					
E-MAIL ADDRESS OF COMMITTEE (REQUIRED) / FAX (OPTIONAL)		STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	
COUNTY OF DOMICILE	JURISDICTION WHERE COMMITTEE IS ACTIVE						
San Francisco	City of Redwood City						
Attach additional information on appropriately labeled continuation sheets.		EMAIL ADDRESS OF ASSISTANT TREASURER (REQUIRED)		AREA CODE/PHONE			
		NAME OF PRINCIPAL OFFICER(S)		STREET ADDRESS (NO P.O. BOX)			
		Lorena Melgarejo		San Francisco		CA	94112
		EMAIL ADDRESS OF PRINCIPAL OFFICER(S) (REQUIRED)		AREA CODE/PHONE			

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.

12/13/2023 *Albany Aroyan*

Executed on _____ By _____
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

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

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

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COMMITTEE NAME

Affordable Redwood City 2024 Sponsored by Faith in Action Bay Area

I.D. NUMBER

1464366

- All committees must list the financial institution where the campaign bank account is located and the person(s) authorized to obtain bank records.

NAME OF FINANCIAL INSTITUTION AND PERSON(S) AUTHORIZED TO OBTAIN BANK RECORDS

Mechanics Bank

AREA CODE/PHONE

(415)249-0325

BANK ACCOUNT NUMBER

[REDACTED]

ADDRESS OF FINANCIAL INSTITUTION

343 Sansome St, Suite 100

CITY

San Francisco

STATE

CA

ZIP CODE

94104

4. Type of Committee *Complete the applicable sections.*

Controlled Committee

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.
- List the political party with which each officeholder or candidate is affiliated or check "nonpartisan." Stating "No party preference" is acceptable.
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROponent	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	PARTY CHECK ONE		(list political party below)
			Nonpartisan	Partisan	
			Nonpartisan	Partisan	(list political party below)
			Nonpartisan	Partisan	(list political party below)

Primarily Formed Committee

Primarily formed to support or oppose specific candidates or measures in a single election. List below:

CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)
IF A RECALL, STATE "RECALL" IN FRONT OF THE OFFICEHOLDER'S NAME.

Rent Control Initiative: TBD

City of Redwood City

CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION
(INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)

CHECK ONE

SUPPORT	OPPOSE
<input checked="" type="checkbox"/>	<input type="checkbox"/>
SUPPORT	OPPOSE
<input type="checkbox"/>	<input type="checkbox"/>

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COMMITTEE NAME

Affordable Redwood City 2024 Sponsored by Faith in Action Bay Area

I.D. NUMBER

1464366

4. Type of Committee *(Continued)*

General Purpose Committee

Not formed to support or oppose specific candidates or measures in a single election. Check only one box:

CITY Committee

COUNTY Committee

STATE Committee

PROVIDE BRIEF DESCRIPTION OF ACTIVITY

Sponsored Committee

List additional sponsors on an attachment.

NAME OF SPONSOR

Faith in Action Bay Area

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

Faith-based community organizing network

STREET ADDRESS

1780 Broadway Street

CITY

Redwood City

STATE

CA

ZIP CODE

94063

AREA CODE/PHONE

(415) 724-4987

Small Contributor Committee

_____ / _____ / _____

Date qualified

5. Termination Requirements

By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or ponent certify that all of the following conditions have been met:

- This committee has ceased to receive contributions and make expenditures;
- This committee does not anticipate receiving contributions or making expenditures in the future;
- This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
- This committee has no surplus funds; and
- This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
 - There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
 - Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 - 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.