**Statement of Organization**  
**Recipient Committee**

**Statement Type**  
- [ ] Initial  
- [ ] Amendment  
- [ ] Termination – See Part 5

List I.D. number:
- # 1386566

Date qualified as committee:
- / / 2016

Date qualified as committee (if applicable):
- / / 2016

Date of Termination:
- 12 / 31 / 2016

### 1. Committee Information

**NAME OF COMMITTEE**

**DAN ALBERT FOR CITY COUNCIL 2016**

**STREET ADDRESS**  
NO P.O. BOX

**CITY**  
MONTEREY

**STATE**  
CA

**ZIP CODE**  
93940

**AREA CODE/PHONE**  
(831) [*** redacted ***]

**MAILING ADDRESS (IF DIFFERENT)**

**COUNTRY OF DOMICILE**

**MONTEREY**

**JURISDICTION WHERE COMMITTEE IS ACTIVE**

**MONTEREY**

Attach additional information on appropriately labeled continuation sheets.

### 2. Treasurer and Other Principal Officers

**NAME OF TREASURER**

**PAUL GIAMONA**

**STREET ADDRESS**  
NO P.O. BOX

**CITY**  
MONTEREY

**STATE**  
CA

**ZIP CODE**  
93940

**AREA CODE/PHONE**  
(831) [*** redacted ***]

**NAME OF ASSISTANT TREASURER, IF ANY**

**STREET ADDRESS**  
NO P.O. BOX

**CITY**

**STATE**

**ZIP CODE**

**AREA CODE/PHONE**

**NAME OF PRINCIPAL OFFICER(S)**

**DAN ALBERT**

**STREET ADDRESS**  
NO P.O. BOX

**CITY**  
MONTEREY

**STATE**  
CA

**ZIP CODE**  
93940

**AREA CODE/PHONE**  
(831) [*** redacted ***]

### 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**

**DATE**

**By**

**SIGNATURE OF TREASURER OR ASSISTANT TREASURER**

**Executed on**

**DATE**

**By**

**SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT**

**Executed on**

**DATE**

**By**

**SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT**

**Executed on**

**DATE**

**By**

**SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT**