

**Statement of Organization
Recipient Committee**

Date Stamp

**CALIFORNIA
FORM 410**

For Official Use Only

CITY CLERK'S OFFICE
JUL 02 2024 AM 10:21

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 09 / 16 / 2021	Date of termination _____ / _____ / _____

1. Committee Information		I.D. Number <small>(if applicable)</small>		2. Treasurer and Other Principal Officers			
NAME OF COMMITTEE Rod Brewer for Elk Grove City Council 2022		1439444		NAME OF TREASURER Roderick Brewer			
STREET ADDRESS (NO P.O. BOX) [REDACTED]		CITY Elk Grove		STREET ADDRESS (NO P.O. BOX) 1700 Tribute Road, Suite 201		CITY Sacramento	
CITY Elk Grove		STATE CA		STATE CA		ZIP CODE 95815	
ZIP CODE 95624		AREA CODE/PHONE (916) 208-8841		EMAIL ADDRESS OF TREASURER (REQUIRED) rodbrewer5@gmail.com		AREA CODE/PHONE (916) 285-5733	
FULL MAILING ADDRESS (IF DIFFERENT) 1700 Tribute Road, Suite 201 Sacramento, CA 95815		NAME OF ASSISTANT TREASURER, IF ANY Shawnda Deane		STREET ADDRESS (NO P.O. BOX) 1700 Tribute Road, Suite 201		CITY Sacramento	
E-MAIL ADDRESS OF COMMITTEE (REQUIRED) / FAX (OPTIONAL) Brewereg2022@deaneandcompany.com / (916) 333-1344		EMAIL ADDRESS OF ASSISTANT TREASURER (REQUIRED) ATSD@deaneandcompany.com		STATE CA		ZIP CODE 95815	
COUNTY OF DOMICILE Sacramento County		JURISDICTION WHERE COMMITTEE IS ACTIVE City of Elk Grove		EMAIL ADDRESS OF ASSISTANT TREASURER (REQUIRED) ATSD@deaneandcompany.com		AREA CODE/PHONE (916) 285-5733	
Attach additional information on appropriately labeled continuation sheets.		NAME OF PRINCIPAL OFFICER(S)		STREET ADDRESS (NO P.O. BOX)		CITY	
		STREET ADDRESS (NO P.O. BOX)		STATE		ZIP CODE	
		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 information provided is true and complete.

Executed on 06/28/24 By [REDACTED] TREASURER

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

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

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

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NAME OF COMMITTEE Rod Brewer for Elk Grove City Council 2022		1439444		NAME OF TREASURER Roderick Brewer			
STREET ADDRESS (NO P.O. BOX) [REDACTED]		CITY Elk Grove		STREET ADDRESS (NO P.O. BOX) 1700 Tribute Road, Suite 201		CITY Sacramento	
STATE CA		ZIP CODE 95624		STATE CA		ZIP CODE 95815	
AREA CODE/PHONE (916) 208-8841		FULL MAILING ADDRESS (IF DIFFERENT) 1700 Tribute Road, Suite 201 Sacramento, CA 95815		EMAIL ADDRESS OF TREASURER (REQUIRED) rodbrewer5@gmail.com			
E-MAIL ADDRESS OF COMMITTEE (REQUIRED)/FAX (OPTIONAL) Brewereg2022@deaneandcompany.com / (916)333-1344		COUNTY OF DOMICILE Sacramento County		JURISDICTION WHERE COMMITTEE IS ACTIVE City of Elk Grove		AREA CODE/PHONE (916) 285-5733	
Attach additional information on appropriately labeled continuation sheets.				NAME OF ASSISTANT TREASURER, IF ANY Shawnda Deane			
				STREET ADDRESS (NO P.O. BOX) 1700 Tribute Road, Suite 201		CITY Sacramento	
				STATE CA		ZIP CODE 95815	
				EMAIL ADDRESS OF ASSISTANT TREASURER (REQUIRED) ATSD@deaneandcompany.com			
				NAME OF PRINCIPAL OFFICER(S)			
				STREET ADDRESS (NO P.O. BOX)		CITY	
				STATE		ZIP CODE	
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Executed on _____ By _____
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 6/28/24 By [Signature]
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

**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

COMMITTEE NAME Rod Brewer for Elk Grove City Council 2022	I.D. NUMBER 1439444
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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 First Foundation Bank; Shawnda Deane, Matthew Deane	AREA CODE/PHONE (916) 283-8042	BANK ACCOUNT NUMBER [REDACTED]
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ADDRESS OF FINANCIAL INSTITUTION [REDACTED]	CITY Sacramento	STATE CA	ZIP CODE 95815
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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		
Roderick Brewer	City Council Member City of Elk Grove District 2	2022	Nonpartisan <input checked="" type="checkbox"/>	Partisan <input type="checkbox"/>	(list political party below)
			Nonpartisan <input type="checkbox"/>	Partisan <input type="checkbox"/>	(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.	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
		SUPPORT	OPPOSE

Statement of Organization
Recipient Committee

INSTRUCTIONS ON REVERSE

COMMITTEE NAME
Rod Brewer for Elk Grove City Council 2022

I.D. NUMBER
1439444

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

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

STREET ADDRESS

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE/PHONE

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.