

Statement of Organization Recipient Committee

Statement Type

☐ Initial☐ Not yet qualified
or☐ Date qualification threshold met☐ Amendment

Date qualification threshold met

☒ Termination – See Part 5

Date of termination

04 / 01 / 2024

Date Stamp

RECEIVED

2024 MAY 20 AM 11:01

CITY CLERK
CITY OF CULVER CITYCALIFORNIA
FORM

410

For Official Use Only

1. Committee Information

I.D. Number
(if applicable)

1433080

NAME OF COMMITTEE

Onward Culver City

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Culver City	CA	90232	(310)923-6123

FULL MAILING ADDRESS (IF DIFFERENT)

E-MAIL ADDRESS OF COMMITTEE (REQUIRED) / FAX (OPTIONAL)
nick@onwardculvercity.orgCOUNTY OF DOMICILE
Los AngelesJURISDICTION WHERE COMMITTEE IS ACTIVE
Culver City

Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers

NAME OF TREASURER

Nick Guthman

STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE

Culver City CA 90230

EMAIL ADDRESS OF TREASURER (REQUIRED) AREA CODE/PHONE

nickguthman@democracypartners.com (310)923-6123

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE

EMAIL ADDRESS OF ASSISTANT TREASURER (REQUIRED) AREA CODE/PHONE

NAME OF PRINCIPAL OFFICER(S)

Karlo Silberger

STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE

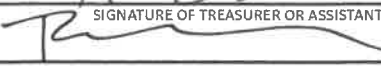
Culver City CA 90230

EMAIL ADDRESS OF PRINCIPAL OFFICER(S) (REQUIRED) AREA CODE/PHONE

ksilbiger@juno.com (617)480-8314

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	3/15/2024	By	Nick Guthman	
	DATE			SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on	3/15/2024	By	Patrick Meighan	
	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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I.D. NUMBER

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2a. Additional Officers / Assistant Treasurers

NAME

Patrick Meighan

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Culver City	CA	90232	(310) 770-5564

NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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COMMITTEE NAME Onward Culver City		I.D. NUMBER 1433080	
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 Bank of America Patrick Meighan		AREA CODE/PHONE (310)558-1053	BANK ACCOUNT NUMBER [REDACTED]
ADDRESS OF FINANCIAL INSTITUTION 3809 Culver Center	CITY Culver City	STATE CA	ZIP CODE 90232

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		
			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.	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
Alex Fisch	City Council Member: Culver City	SUPPORT ☒	OPPOSE ☐
Freddy Puza	City Council Member: Culver City	SUPPORT ☒	OPPOSE ☐

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COMMITTEE NAME

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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

to support candidate and ballot issues in Culver City.

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.

Additional Comments
For Form 410

ADDITIONAL COMMENTS	
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COMMITTEE NAME
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This committee is being terminated.