

**Statement of Organization
Recipient Committee**

Statement Type

<input type="checkbox"/> Initial	<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Termination - See Part 5
<input type="radio"/> Not yet qualified or <input type="radio"/> Date qualification threshold met	Date qualification threshold met	Date of termination
____/____/____	____/____/____	12 / 12 / 2022

Date Stamp	CALIFORNIA FORM 410
CITY CLERK OFFICE	For Official Use Only
2022 DEC 12 A 8:57	

1. Committee Information				2. Treasurer and Other Principal Officers			
NAME OF COMMITTEE				NAME OF TREASURER			
HANS LIANG FOR CITY CLERK 2022				LANNY YU			
STREET ADDRESS (NO P.O. BOX)				STREET ADDRESS (NO P.O. BOX)			
[REDACTED]				[REDACTED]			
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
MONTEREY PARK	CA	91754	626 943-1888	MONTEREY PARK	CA	91754	213 819-9889
FULL MAILING ADDRESS (IF DIFFERENT)				NAME OF ASSISTANT TREASURER, IF ANY			
[REDACTED]				[REDACTED]			
E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)				STREET ADDRESS (NO P.O. BOX)			
HANSLIANG@SBCGLOBAL.NET				[REDACTED]			
COUNTY OF DOMICILE	JURISDICTION WHERE COMMITTEE IS ACTIVE			NAME OF PRINCIPAL OFFICER(S)			
LOS ANGELES	CITY OF MONTEREY PARK			[REDACTED]			
Attach additional information on appropriately labeled continuation sheets.				STREET ADDRESS (NO P.O. BOX)			
				[REDACTED]			
				CITY STATE ZIP CODE 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.

Executed on	12/12/2022	By	
	DATE		SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on	12/12/2022	By	
	DATE		SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT
Executed on	_____	By	_____
	DATE		SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT
Executed on	_____	By	_____
	DATE		SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT