

Statement of Organization  
Recipient Committee

Statement Type

☐ Initial

☐ Not yet qualified  
or

☐ Date qualification threshold met

☒ Amendment

Date qualification threshold met

05 / 22 / 2012

☐ Termination – See Part 5

Date of termination

Date Stamp

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in the office of the California  
Secretary of State  
**APR 13 2024**

**CALIFORNIA  
FORM 410**

For Official Use Only

**APR 22 2024**

1. Committee Information		I.D. Number (if applicable)	2. Treasurer and Other Principal Officers	
NAME OF COMMITTEE			NAME OF TREASURER	
Laguna Beach Police Employees Association Political Action Committee			Andreas C. Rockas	
STREET ADDRESS (NO P.O. BOX)			CITY	STATE ZIP CODE
1121 L Street, Ste. 200			1121 L Street, Ste. 200	Sacramento CA 95814
E-MAIL ADDRESS OF COMMITTEE (REQUIRED) / FAX (OPTIONAL)			EMAIL ADDRESS OF TREASURER (REQUIRED)	
fppc@rockaslaw.com			fppc@rockaslaw.com	
COUNTY OF DOMICILE			NAME OF ASSISTANT TREASURER, IF ANY	
Sacramento				
JURISDICTION WHERE COMMITTEE IS ACTIVE			STREET ADDRESS (NO P.O. BOX)	
City of Laguna Beach			CITY STATE ZIP CODE	
Attach additional information on appropriately labeled continuation sheets.			1121 L Street, Ste. 200 Sacramento CA 95814	
			EMAIL ADDRESS OF ASSISTANT TREASURER (REQUIRED)	
			AREA CODE/PHONE	
			(916) 556-1776	
			NAME OF PRINCIPAL OFFICER(S)	
			Brian Griep	
			STREET ADDRESS (NO P.O. BOX)	
			CITY STATE ZIP CODE	
			1121 L Street, Ste. 200 Sacramento CA 95814	
			EMAIL ADDRESS OF PRINCIPAL OFFICER(S) (REQUIRED)	
			fppc@rockaslaw.com	
			AREA CODE/PHONE	
			(916) 556-1776	

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 4/12/2024 By Andreas C. Rockas  
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

# Statement of Organization Recipient Committee

INSTRUCTIONS ON REVERSE

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COMMITTEE NAME  
Laguna Beach Police Employees Association Political Action Committee

I.D. NUMBER  
1346972

- 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

California Bank & Trust - Trish Mayer, Zoe Misquez

AREA CODE/PHONE

(213) 228-1709

BANK ACCOUNT NUMBER

ADDRESS OF FINANCIAL INSTITUTION

550 S. Hope Street, Suite 100

CITY

Los Angeles

STATE

CA

ZIP CODE

90071

## 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	
		SUPPORT	OPPOSE
		SUPPORT	OPPOSE

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COMMITTEE NAME  
Laguna Beach Police Employees Association Political Action Committee

I.D. NUMBER  
1346972

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 and oppose state and local candidates.

Sponsored Committee

List additional sponsors on an attachment.

NAME OF SPONSOR

Laguna Beach Police Employees Association

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

Law enforcement labor organization

STREET ADDRESS

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE/PHONE

1121 L Street, Ste. 200

Sacramento

CA

95814

(916) 556-1776

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.

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**COMMITTEE NAME**

Laguna Beach Police Employees Association Political Action Committee

**I.D. NUMBER**

1346972

**Additional Comments**

Laguna Beach PEA's mailing address is P.O. Box 5171, Laguna Beach, CA 92652






# Laguna Beach PEA Form 410 AT2

Final Audit Report

2024-04-12

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