

Semi-Annual Statement of No Activity

Type or print in Ink.

STATEMENT OF NO ACTIVITY

For use by recipient committees that have not received any contributions and have not made any expenditures during the six-month period covered by a semi-annual statement. **Candidate controlled committees formed for an elective office may not use this form.**

See the Information Manual on Campaign Disclosure Provisions of the Political Reform Act for additional information and information required to be provided to you pursuant to the Information Practices Act of 1977.

Date Stamp RECEIVED JUL 19 2021 City Clerk's Office City of Los Alamitos	CALIFORNIA FORM 425 For Official Use Only
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1. Committee Information

I.D. NUMBER
1432883

COMMITTEE NAME

Doby for City Council District 1 2020

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Tanya Doby

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

2. Period of No Activity

No contributions have been received and no expenditures have been made during the period covering the dates below:

Check one of the following boxes and complete the year. January 1, through June 30, 20²¹ July 1, through December 31, 20____

3. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this information and certify that the information is true and complete. I certify under penalty of perjury under the laws of the State of California that the information contained herein is true and complete.

Executed on

7/19/2021
DATE

TREASURER

FPPC Form 425 (Jan/01)
Toll-Free Helpline: 866/ASK-FPPC
866/276-3772