

**Statement of Organization  
Recipient Committee**

Date Stamp

**CALIFORNIA  
FORM 410**

**Statement Type**

<input checked="" type="checkbox"/> <b>Initial</b> <input type="checkbox"/> Not yet qualified or <input checked="" type="checkbox"/> Date qualification threshold met 02 / 09 / 2010	<input type="checkbox"/> <b>Amendment</b> Date qualification threshold met ____ / ____ / ____	<input type="checkbox"/> <b>Termination – See Part 5</b> Date of termination ____ / ____ / ____
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Rcv'd in City Clerk's Office  
January 30, 2025

For Official Use Only

1. Committee Information		I.D. Number <i>(if applicable)</i>		2. Treasurer and Other Principal Officers			
NAME OF COMMITTEE		1323319		NAME OF TREASURER			
Al Murray for City Council 2028				Lysa Ray			
STREET ADDRESS (NO P.O. BOX)				STREET ADDRESS (NO P.O. BOX)		CITY STATE ZIP CODE	
[REDACTED]				3843 S Bristol St #604		Santa Ana CA 92704	
CITY STATE ZIP CODE AREA CODE/PHONE				EMAIL ADDRESS OF TREASURER (REQUIRED)			
Tustin Ranch CA 92782 (714) 540-2295				(714) 540-2295			
FULL MAILING ADDRESS (IF DIFFERENT)				NAME OF ASSISTANT TREASURER, IF ANY			
c/o Lysa Ray 3843 S Bristol St #604 Santa Ana, CA 92704							
E-MAIL ADDRESS OF COMMITTEE (REQUIRED) / FAX (OPTIONAL)				STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE			
lysaray.campaignservices@gmail.com							
COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE				EMAIL ADDRESS OF ASSISTANT TREASURER (REQUIRED) AREA CODE/PHONE			
Orange Orange							
Attach additional information on appropriately labeled continuation sheets.				NAME OF PRINCIPAL OFFICER(S)			
				STREET ADDRESS (NO P.O. BOX) CITY 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 foregoing is true and correct.

Executed on	01/30/2025	By	[REDACTED]	Executed on	01/30/2025	By	[REDACTED]
	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT		DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
Executed on	01/30/2025	By	[REDACTED]	Executed on	01/30/2025	By	[REDACTED]
	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT		DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
Executed on	01/30/2025	By	[REDACTED]	Executed on	01/30/2025	By	[REDACTED]
	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT		DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

**Statement of Organization  
Recipient Committee**

INSTRUCTIONS ON REVERSE

COMMITTEE NAME Al Murray for City Council 2028	I.D. NUMBER 1323319
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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 Bank of America	AREA CODE/PHONE [REDACTED]	BANK ACCOUNT NUMBER [REDACTED]
ADDRESS OF FINANCIAL INSTITUTION 3730 S Bristol St	CITY Santa Ana	STATE CA
		ZIP CODE

**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		
Elwyn Al Murray	City Council Member Tustin	2028	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 <input type="checkbox"/>	OPPOSE <input type="checkbox"/>
		SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>

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INSTRUCTIONS ON REVERSE

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COMMITTEE NAME  
Al Murray for City Council 2028

**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.