

**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

Date Stamp

**RECEIVED AND FILED**  
in the office of the Secretary of State  
of the State of California

AUG 22 2024

CALIFORNIA FORM 410

For Official Use Only

SEP 10 2024

Imperial County

**1. Committee Information**

NAME OF COMMITTEE: Frances A. Terrazas for El Centro Elementary School District Board - 2024  
 I.D. Number (if applicable):  
 STREET ADDRESS (NO P.O. BOX): 1744 Desert Gardens Dr. El Centro CA 92243  
 CITY: El Centro STATE: CA ZIP CODE: 92243 AREA CODE/PHONE: 760 996-7706  
 FULL MAILING ADDRESS (IF DIFFERENT): P.O. Box 2123 El Centro, CA 92244  
 E-MAIL ADDRESS OF COMMITTEE (REQUIRED) / FAX (OPTIONAL): frances.terrazas@gmail.com  
 COUNTY OF DOMICILE: Imperial JURISDICTION WHERE COMMITTEE IS ACTIVE: El Centro, CA

**2. Treasurer and Other Principal Officers**

NAME OF TREASURER: Jesus J. Terrazas  
 STREET ADDRESS (NO P.O. BOX): 1744 Desert Gardens Dr. El Centro CA 92243  
 CITY: El Centro STATE: CA ZIP CODE: 92243 AREA CODE/PHONE: 760 996-7706  
 EMAIL ADDRESS OF TREASURER (REQUIRED): jterrazas@yahoo.com  
 NAME OF ASSISTANT TREASURER, IF ANY: [Blank]  
 STREET ADDRESS (NO P.O. BOX): [Blank]  
 CITY: [Blank] STATE: [Blank] ZIP CODE: [Blank]  
 EMAIL ADDRESS OF ASSISTANT TREASURER (REQUIRED): [Blank]  
 NAME OF PRINCIPAL OFFICER(S): Frances A. Terrazas  
 STREET ADDRESS (NO P.O. BOX): 1744 Desert Gardens Dr. El Centro CA 92243  
 CITY: El Centro STATE: CA ZIP CODE: 92243 AREA CODE/PHONE: 760 996-7706  
 EMAIL ADDRESS OF PRINCIPAL OFFICER(S) (REQUIRED): [Blank]

**3. Verification**

Attach additional information on appropriately labeled continuation sheets.

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 8-18-24 By [Signature] DATE  
 Executed on 8-18-24 By [Signature] DATE  
 Executed on \_\_\_\_\_ By \_\_\_\_\_ DATE  
 Executed on \_\_\_\_\_ By \_\_\_\_\_ DATE

**Statement of Organization  
Recipient Committee**

INSTRUCTIONS ON REVERSE

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I.D. NUMBER

COMMITTEE NAME *Frances A. Terrazas for El Centro Elementary School District Board - 2024*

**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

AREA CODE/PHONE

BANK ACCOUNT NUMBER

ADDRESS OF FINANCIAL INSTITUTION

CITY

STATE

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	Nonpartisan	Partisan	(list political party below)
<i>Frances A. Terrazas</i>	<i>El Centro Elementary School District Trustee</i>	<i>2024</i>	<i>X</i>	Partisan	(list political party below)
	<i>Board Member</i>		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

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I.D. NUMBER

COMMITTEE NAME *Frances A. Terrazas for El Centro Elementary School District Board - 2024*

**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

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, orponent 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.