

**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

12 / 31 / 2023

City of Del Mar  
 Administrative Services Dept.

**CALIFORNIA 410  
FORM**

For Official Use Only

Date Stamp  
**RECEIVED**  
 Jul 31 2024

**1. Committee Information** I.D. Number (451143) **2. Treasurer and Other Principal Officers**

NAME OF COMMITTEE  
 Terry Gaasterland for City Council

NAME OF TREASURER  
 Theresa Gaasterland

STREET ADDRESS (NO P.O. BOX)  
 [REDACTED]

CITY  
 Del Mar

STATE  
 CA

ZIP CODE  
 92014

AREA CODE/PHONE  
 [REDACTED]

FULL MAILING ADDRESS (IF DIFFERENT)

E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)  
 [REDACTED]

COUNTY OF DOMICILE  
 San Diego

JURISDICTION WHERE COMMITTEE IS ACTIVE  
 City of Del Mar

NAME OF PRINCIPAL OFFICER(S)  
 Theresa Gaasterland

STREET ADDRESS (NO P.O. BOX)  
 [REDACTED]

CITY  
 Del Mar

STATE  
 CA

ZIP CODE  
 92014

AREA CODE/PHONE  
 [REDACTED]

Attach additional information on appropriately labeled continuation sheets.

**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 December 31, 2023 By [REDACTED]  
 Executed on December 31, 2023 By [REDACTED]  
 Executed on December 31, 2023 By [REDACTED]  
 Executed on December 31, 2023 By [REDACTED]

Digitally signed by Theresa Gaasterland  
 DN: cn=Theresa Gaasterland, o=City of Del Mar, ou=City of Del Mar, email=thg@delmar.gov, c=US  
 Date: 2023.12.31 15:58:47 -0800

Digitally signed by Theresa Gaasterland  
 DN: cn=Theresa Gaasterland, o=City of Del Mar, ou=City of Del Mar, email=thg@delmar.gov, c=US  
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SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, OR STATE MEASURE PROponent

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Recipient Committee**

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I.D. NUMBER

COMMITTEE NAME  
Terry Gaasterland for City Council 2022

- All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION  
MURG Union Bank

AREA CODE/PHONE  
858-755-9321

BANK ACCOUNT NUMBER  
[REDACTED]

ADDRESS  
1555 Camino Del Mar

CITY  
Del Mar

STATE  
CA

ZIP CODE  
92014

**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		(list political party below)
			Nonpartisan	Partisan	
Terry Gaasterland	Del Mar City Council	2022	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(list political party below)
			<input type="checkbox"/>	<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	OPPOSE	SUPPORT	OPPOSE

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**410**

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I.D. NUMBER

COMMITTEE NAME

**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

Re-election campaign for Del Mar City Council in the November 2022 General Election

**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, officer/holder, 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.