

**Statement of Organization
Recipient Committee**

Statement Type

Initial
 Not yet qualified or
 Date qualification threshold met

Amendment
 Date qualification threshold met
 04 / 01 / 1994

Termination - See Part 5
 Date of termination
 _____ / _____ / _____

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

DEC 27 2021

Date Stamp

CALIFORNIA FORM 410

For Official Use Only



1. Committee Information				2. Treasurer and Other Principal Officers			
I.D. Number 941877 (if applicable)				NAME OF TREASURER Joe Harn			
NAME OF COMMITTEE Committee to Elect Joe Harn El Dorado County Auditor-Controller, 2022				STREET ADDRESS (NO P.O. BOX) [REDACTED]			
STREET ADDRESS (NO P.O. BOX) [REDACTED]				CITY [REDACTED]		STATE ZIP CODE [REDACTED]	
CITY [REDACTED]		STATE [REDACTED]		ZIP CODE [REDACTED]		AREA CODE/PHONE 530-556-0999	
FULL MAILING ADDRESS (IF DIFFERENT)				NAME OF ASSISTANT TREASURER, IF ANY			
E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL) joeharnathome@yahoo.com				STREET ADDRESS (NO P.O. BOX)			
COUNTY OF DOMICILE El Dorado		JURISDICTION WHERE COMMITTEE IS ACTIVE El Dorado County		NAME OF PRINCIPAL OFFICER(S)			
Attach additional information on appropriately labeled continuation sheets.				STREET ADDRESS (NO P.O. BOX)			
CITY [REDACTED]		STATE [REDACTED]		ZIP CODE [REDACTED]		AREA CODE/PHONE [REDACTED]	

3. Verification

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

Executed on 12-23-2021 By [REDACTED]

Executed on _____ By [REDACTED]

Executed on 12-23-2021 By [REDACTED]

Executed on _____ By [REDACTED]

**Statement of Organization
Recipient Committee**

INSTRUCTIONS ON REVERSE

COMMITTEE NAME Committee to Elect Joe Harn El Dorado County Auditor-Controller, 2022	I.D. NUMBER 941877
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- All committees must list the financial institution where the campaign bank account is located.

NAME OF FINANCIAL INSTITUTION El Dorado Savings Bank	AREA CODE/PHONE 530-622-1492	BANK ACCOUNT NUMBER 113033880	
ADDRESS 4040 El Dorado Road	CITY Placerville	STATE CA	ZIP CODE 95682

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		
Joe Harn	El Dorado County Auditor-Controller	2022	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"/>

December 23, 2021

Secretary of State
Political Reform Division
1500 11th Street, Rm 495
Sacramento, CA 95814



RE: Amended Form 410

Ladies and Gentlemen:

This letter is my response to your letter dated December 16, 2021.
Enclosed you will find my corrected and amended Form 410.

If you have any questions please contact me.

Sincerely,


Joe Harn, Treasurer

Committee to Elect Joe Harn, EDC Auditor Controller, 2022

FPPC# 94-1877

3340 Rolls Drive

Cameron Park, CA 95682

Email

Phone Number 530-556-0999