Statement of Organization Recipient Committee		l	Type or print in ink			CITY OF SANTA CLARITA CALIFORNIA						
Statement Type	☐ Initial		571 a .					OF SANT	A CLARIT	A GARI	FORNIA 410	
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Attach additional i	nformation on appropri	ately labeled co	ntinuation sheets.	***************************************		CITY			STATE	ZIP CODE	AREA CODE/PHONE	
3. Verification	easonable diligence	in preparing t	his statement an	d to the best	of my kn <u>ov</u>	/ledge-the-informatic	ishoaso	ned-herein is	s true and co	mplete. I ceri	iify under penalty of	
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