

Officeholder and Candidate
Campaign Statement -
Short Form

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CITY OF WEST HOLLYWOOD
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OFFICE OF THE CITY CLERK

CALIFORNIA FORM 470
For Official Use Only

Date of election if applicable:
(Month, Day, Year)
3/3/2015

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 15.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
BRIAN FUNNAGAN

STREET ADDRESS
8450 DELINGPRE AVE # 5

CITY STATE ZIP CODE
WEST HOLLYWOOD CA 90069

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
CITY COUNCIL MEMBER

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
WEST HOLLYWOOD

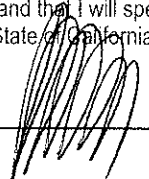
4. Committee Information
List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$1,000 and that I will spend less than \$1,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on JAN 21 2015 DATE

By  SIGNATURE OF OFFICEHOLDER OR CANDIDATE

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