

**Statement of Organization
Recipient Committee**

Type or print in ink

Statement Type

Initial
Not yet qualified or

_____/_____/_____
Date qualified as committee

Amendment
List I.D. number:

_____/_____/_____
Date qualified as committee
(If applicable)

Termination - See Part 5
List I.D. number:

1372737
_____/_____/_____
Date of Termination

RECEIVED CITY OF WEST HOLLYWOOD Date Stamp 16 FEB -1 AM 11:27 OFFICE OF THE CITY CLERK	STATEMENT OF ORGANIZATION CALIFORNIA FORM 410 For Official Use Only
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1. Committee Information

NAME OF COMMITTEE

Lindsey Horvath for West Hollywood City Council 2015

STREET ADDRESS (NO P.O. BOX)

16633 Ventura Blvd., #1008

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Encino	CA	91436	323-655-4065

MAILING ADDRESS (IF DIFFERENT)

OPTIONAL: FAX / E-MAIL ADDRESS

COUNTY OF DOMICILE

COUNTY WHERE COMMITTEE IS ACTIVE IF DIFFERENT THAN COUNTY OF DOMICILE

Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers

NAME OF TREASURER

Jane Leiderman

STREET ADDRESS (NO P.O. BOX)

16633 Ventura Blvd., #1008

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Encino	CA	91436	323-655-4065

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME OF PRINCIPAL OFFICER(S)

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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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 _____ DATE 1/29/16
 Executed on _____ DATE 1/28/16
 Executed on _____ DATE _____
 Executed on _____ DATE _____

By _____ SIGNATURE OF TREASURER OR ASSISTANT TREASURER
 By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
 By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
 By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT