

**Major Donor and
Independent Expenditure Committee
Campaign Statement**

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SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 07/01/2015
through 12/31/2015
Date of election if applicable:
(Month, Day, Year)

1. Name and Address of Filer

NAME OF FILER
TOWNSCAPE MANAGEMENT, INC.

RESIDENTIAL OR MAILING ADDRESS (NO. AND STREET)
8899 BEVERLY BOULEVARD

CITY STATE ZIP CODE
LOS ANGELES CA 90048

RESPONSIBLE OFFICER
(If filer is other than an individual)
BRADLEY HERTZ, AGENT/ATTORNEY FOR FILER

AREA CODE/DAYTIME PHONE
(415) 732-7700

2. Nature and Interests of Filer (Complete each applicable section.)

A FILER WHO IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS

NAME OF EMPLOYER/BUSINESS BUSINESS INTERESTS

ADDRESS OF EMPLOYER/BUSINESS

A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS ENGAGED
REAL ESTATE

A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS

A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY

3. Summary

(Amounts may be rounded to whole dollars.)

1. Expenditures and contributions (including loans) of \$100 or more made this period. (Part 5.) \$ 0.00

2. Unitemized expenditures and contributions (including loans) under \$100 made this period. \$ 0.00

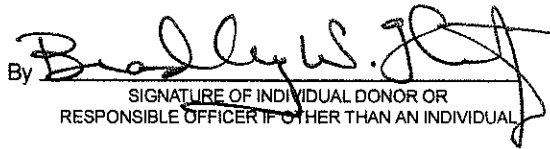
3. Total expenditures and contributions made this period. (Add Lines 1 + 2.) **SUBTOTAL** \$ 0.00

4. Total expenditures and contributions made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.) \$ 34,962.00

5. Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.) **TOTAL** \$ 34,962.00

4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 1/27/16 By 
DATE SIGNATURE OF INDIVIDUAL DONOR OR RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL

Amendment (Explain): _____