

**Officeholder and Candidate
Campaign Statement –
Short Form**

(Government Code Section 84206)

Type or print in ink.

RECEIVED
CITY OF WEST HOLLYWOOD
Date Stamp
11 JAN 10 PM 1:31

SHORT FORM

CALIFORNIA
FORM **470**

For Official Use Only

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

03/08/11

Amendment (Explain Below)

OFFICE OF THE CITY CLERK

1. Statement Covers Calendar Year 2010.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

MARK GONZAGA

STREET ADDRESS

1037 N. GENESEE AVE. #1

CITY

WEST HOLLYWOOD, CA

STATE

ZIP CODE

90046

AREA CODE/DAYTIME PHONE NUMBER

323-848-9787

OPTIONAL FAX/E-MAIL ADDRESS

gonzma1@aol.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD

CITY COUNCILMEMBER

JURISDICTION (LOCATION)

WEST HOLLYWOOD

DISTRICT NUMBER
(IF APPLICABLE)

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
NONE		
NONE		

5. Verification

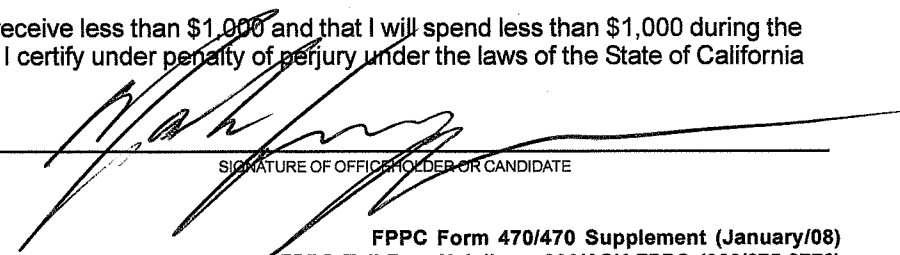
I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$1,000 and that I will spend less than \$1,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the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

Executed on

JAN. 7, 2011

DATE

By



SIGNATURE OF OFFICEHOLDER OR CANDIDATE