

**Statement of Organization
Recipient Committee**

Type or print in ink

STATEMENT OF ORGANIZATION

Statement Type Initial
Not yet qualified or
_____/_____/_____
Date qualified as committee

Amendment
List I.D. number:
1334417
_____/_____/_____
Date qualified as committee
(if applicable)

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

_____/_____/_____
Date of Termination

Date Stamp
RECEIVED
CITY OF WEST HOLLYWOOD
11 JAN 27 PM 12:08
OFFICE OF THE CITY CLERK

CALIFORNIA FORM 410

For Official Use Only

1. Committee Information

NAME OF COMMITTEE
Concerned Neighbors Against Illegal Billboards: A coalition of neighborhood activists, residents, businesses, outdoor advertisers, homeowners associations and seniors opposed to the permitting and expansion of illegal billboards - No on Measure A

STREET ADDRESS (NO PO. BOX)
7302 Santa Monica Blvd.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
West Hollywood	CA	90046	818-260-0669

MAILING ADDRESS (IF DIFFERENT)
1212 S. Victory Blvd., Burbank, CA 91502

OPTIONAL: FAX / E-MAIL ADDRESS
818-260-0657

COUNTY OF DOMICILE Los Angeles	COUNTY WHERE COMMITTEE IS ACTIVE IF DIFFERENT THAN COUNTY OF DOMICILE
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Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers

NAME OF TREASURER
Kinde Durkee

STREET ADDRESS
1212 S. Victory Blvd.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Burbank	CA	91502	818-260-0669

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
_____/_____/_____/_____

NAME AND POSITION OF OTHER PRINCIPAL OFFICER(S), IF APPLICABLE
SEE ATTACHED PAGE

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
_____/_____/_____/_____

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 1/26/11
DATE

Executed on _____
DATE

Executed on _____
DATE

Executed on _____
DATE

By Kinde Durkee
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

Form 410 Attachment for Page 1, Part 2: Principal Officers

President:

John Q. Duong
19320 Harborage Way
Torrance, CA 90501
310-755-7263

Secretary and Chief Financial Officer:

Ryan Brooks
1731 Workman Street
Los Angeles, CA 90031
323-276-7202