Statement of Organization
Recipient Committee

1. Committee Information
NAME OF COMMITTEE:
Block for West Hollywood City Council 2015
STREET ADDRESS (NO P.O. BOX):
737 Huntley Dr
CITY: West Hollywood
STATE: CA
ZIP CODE: 90069
AREA CODE/PHONE: (310)360-9999
MAILING ADDRESS (IF DIFFERENT):

SIGNED ELECTRONICALLY
larryblock@hotmail.com
COUNTY OF DOMICILE: Los Angeles

JURISDICTION WHERE COMMITTEE IS ACTIVE:

ATTACH ADDITIONAL INFORMATION ON APPROPRIATELY LABELED CONTINUATION SHEETS.

2. Treasurer and Other Principal Officers
NAME OF TREASURER:
Larry Block
STREET ADDRESS (NO P.O. BOX):
737 Huntley Dr.
CITY: West Hollywood
STATE: CA
ZIP CODE: 90069
AREA CODE/PHONE: (310)360-9999

NAME OF ASSISTANT TREASURER, IF ANY:

STREET ADDRESS (NO P.O. BOX):
CITY: West Hollywood
STATE: CA
ZIP CODE: 90069
AREA CODE/PHONE: (310)360-9999

NAME OF PRINCIPAL OFFICER:

STREET ADDRESS (NO P.O. BOX):
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 3/19/15

By

SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 3/19/15

By

SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT

Executed on

By

SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT

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By

SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT

FPPC Form 410 (Dec/2012)
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