Statement of Organization
Recipient Committee

Statement Type  ☐ Initial  ☑ Amendment
Not yet qualified  ☐ or  ☑ Termination - See Part 5
List I.D. number: 1363936
List I.D. number: 1363936

Date qualified as committee  12/31/2015
Date qualified as committee [if applicable]
Date of Termination

1. Committee Information
NAME OF COMMITTEE
Lauren Meister for West Hollywood City Council 2015

STREET ADDRESS (NO P.O. BOX)
337 Westbourne Drive

CITY  STATE  ZIP CODE  AREA CODE/PHONE
West Hollywood  CA  90048  310-659-3379

MAILING ADDRESS (IF DIFFERENT)

FAX / E-MAIL ADDRESS
lauren@meister4weho.com

COUNTY OF DOMICILE  JURISDICTION WHERE COMMITTEE IS ACTIVE
Los Angeles  West Hollywood, CA

Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers
NAME OF TREASURER
Elyse Eisenberg

STREET ADDRESS (NO P.O. BOX)
1230 Horn Avenue, #526

CITY  STATE  ZIP CODE  AREA CODE/PHONE
West Hollywood  CA  90069  310-657-6190

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO P.O. BOX)

CITY  STATE  ZIP CODE  AREA CODE/PHONE

NAME OF PRINCIPAL OFFICER(S)

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  12/31/2015  By   
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on  12/31/2015  By   
SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROponent

Executed on   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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