

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

(Government Code Section 84206)

Type or print in ink.

SHORT FORM

Date of election if applicable:
(Month, Day, Year)
Nov. 2008

Amendment (Explain Below)

Date Stamp

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CALIFORNIA FORM 470

For Official Use Only

JUL 30 2009

CITY OF COTATI
CITY MANAGER/CITY CLERK

1. Statement Covers Calendar Year 20 09.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Eric Kirchmann (Former Candidate)

STREET ADDRESS
[REDACTED]

CITY STATE ZIP CODE 94931

AREA CODE/DAY TIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Cotati City Council

JURISDICTION (LOCATION)
Cotati, Sonoma County

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 |
|--------------------------------|-------------------------|-----------------------|
| <u>Eric Kirchmann 1312979</u> | [REDACTED] <u>94931</u> | <u>Eric Kirchmann</u> |

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 7/30/09 DATE

By [REDACTED] SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Committee Dissolved 2/2/09
(Terminated) 