

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

RECEIVED
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JUL 31 2013

**CITY OF COTATI
CITY MANAGER/CITY CLERK**

Amendment (Explain Below)

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

CALIFORNIA FORM 470
For Official Use Only

1. Statement Covers Calendar Year 20 13 ____.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

John C. Moore

STREET ADDRESS

██████████

CITY

Cotati

AREA CODE/DAYTIME PHONE NUMBER

██████████

STATE

Ca

OPTIONAL: FAX / E-MAIL ADDRESS

ZIP CODE

94931

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Councilmember

JURISDICTION (LOCATION)

City of Cotati

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
N/A		

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 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 July 30, 2013 DATE

By: ██████████ SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Clear Form

Print Form