

Officeholder and Candidate  
Campaign Statement -  
Short Form

Date of election if applicable: (Month, Day, Year)  11/3/2020	<input type="checkbox"/> Amendment (Explain Below)  _____ _____	Date Stamp SEP 22 2020 AM 10 R. D. HARRIS CITY CLERK	CALIFORNIA FORM 470 For Official Use Only
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1. Statement Covers Calendar Year 20 20

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Stephen Dunn

STREET ADDRESS

CITY

Upland

AREA CODE/DAYTIME PHONE NUMBER

STATE ZIP CODE

CA 91784

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Treasurer

JURISDICTION (LOCATION)

City of Upland

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
None		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$2,000 and that I will spend less than \$2,000 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 9/19/2020  
DATE

By [Redacted Signature]  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Clear Form

Print Form