

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

(Government Code Section 84206)

Type or print in ink.

CITY CLERK
MORENO VALLEY

SHORT FORM

RECEIVED

CALIFORNIA
FORM **470**

For Official Use Only

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

11/4/2014

Amendment (Explain Below)

13 OCT -1 PM 3:52

1. Statement Covers Calendar Year 20 13

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Ykstian Alberto Gutierrez

STREET ADDRESS

[REDACTED]

Moreno Valley

CITY

STATE

ZIP CODE

CA 92551

AREA CODE/DAYTIME PHONE NUMBER

[REDACTED]

OPTIONAL FAX/E-MAIL ADDRESS

[REDACTED]

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Council Member

JURISDICTION (LOCATION)

Moreno Valley

DISTRICT NUMBER
(IF APPLICABLE)

4

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

Dr. Gutierrez for City Council 2014

Moreno Valley, CA 92551

Ykstian Alberto Gutierrez

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

10/1/2013

DATE

By

[REDACTED SIGNATURE]

SIGNATURE OF OFFICEHOLDER OR CANDIDATE