

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

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

November 8, 2022

Amendment (Explain Below)

Date Stamp
RECEIVED
JUL 28 2022

CALIFORNIA FORM 470

For Official Use Only

CITY OF WESTLAKE VILLAGE
WESTLAKE VILLAGE, CA

1. Statement Covers Calendar Year 20 22 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Susan McSweeney

STREET ADDRESS
[REDACTED]

CITY STATE ZIP CODE
[REDACTED]

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
818-706-1613

3. Office Sought or Held

OFFICE SOUGHT OR HELD
City Councilmember

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
City of Westlake Village

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

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 information provided on this statement is true and correct.

Executed on July 28, 2022 DATE

By: [REDACTED]