SHORT FORM

Officeholder and Candidate Campaign Statement – Short Form

(Government Code Section 84206)

Type or print in ink.

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

☐ Amendment (Explain Below)

Date Stamp RECEIVED JUL - 8 2011 CITY OF ATASCADERO CITY CLERK

CALIFORNIA FORM 470

For Official Use Only

1. Statement Covers Calendar Year 20 10 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Jerry L Clay Sr.

STREET ADDRESS

6907 El Camino Real

CITY | STATE | ZIP CODE

Atascadero | CA | 93422

AREA CODE/DAYTIME PHONE NUMBER | OPTIONAL: FAX / E-MAIL ADDRESS

805-470-3400

3. Office Sought or Held

OFFICE SOUGHT OR HELD

City Council Member

JURISDICTION (LOCATION) | DISTRICT NUMBER (IF APPLICABLE)

City of Atascadero

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 $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 July 8, 2011 (DATE)

By Jerry L. Clay Sr. (SIGNATURE OF OFFICEHOLDER OR CANDIDATE)