Statement of Organization
Recipient Committee

Statement Type  □ Initial  □ Amendment  ☑ Termination – See Part 5

Date qualified as committee  / / /  7 / 28 / 20
Date of termination  / / /  / / / /

1. Committee Information  I.D. Number (if applicable) 1334106

NAME OF COMMITTEE
Julian Gold M.D. for City Council (2020)

STREET ADDRESS (NO P.O. BOX)
c/o FTA Events, 280 So. Beverly Drive, Ste. 302

MAILING ADDRESS (IF DIFFERENT)

E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)
goldjmd@gmail.com

CITY STATE ZIP CODE AREA CODE/PHONE
Beverly Hills CA 90212 (310) 288-0517

COUNTY OF DOMICILE JURISDICTION WHERE COMMITTEE IS ACTIVE
Los Angeles Beverly Hills

NAME OF TREASURER
Howard S. Fisher

STREET ADDRESS (NO P.O. BOX)
9401 Wilshire Blvd. #1250

CITY STATE ZIP CODE AREA CODE/PHONE
Beverly Hills CA 90212 (310) 553-2000

NAME OF ASSISTANT TREASURER, IF ANY

NAME OF PRINCIPAL OFFICER(S)

EXECUTED ON 7/30/20

Signature of Treasurer or Assistant Treasurer

Signature of Controlling Officiable, Candidate, or State Measure Proponent

Signature of Controlling Officiable, Candidate, or State Measure Proponent

Signature of Controlling Officiable, Candidate, or State Measure Proponent

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7/30/20

By

Executed on 7/30/20

By

Executed on

By

Executed on

By

FPPC Form 410 (May/2017)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### Statement of Organization

**Recipient Committee**

**INSTRUCTIONS ON REVERSE**

**COMMITTEE NAME**

Julian Gold for City Council (2020)

---

- All committees must list the financial institution where the campaign bank account is located.

<table>
<thead>
<tr>
<th><strong>NAME OF FINANCIAL INSTITUTION</strong></th>
<th><strong>AREA CODE/PHONE</strong></th>
<th><strong>BANK ACCOUNT NUMBER</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bank of America</td>
<td>(310) 777-2746 &amp; (424) 332 1400</td>
<td>0002 4577 8837</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>ADDRESS</strong></th>
<th><strong>CITY</strong></th>
<th><strong>STATE</strong></th>
<th><strong>ZIP CODE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>468 N. Beverly Dr.</td>
<td>Beverly Hills</td>
<td>CA</td>
<td>90210</td>
</tr>
</tbody>
</table>

---

4. **Type of Committee** Complete the applicable sections.

**Controlled Committee**

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.

- List the political party with which each officeholder or candidate is affiliated or check "nonpartisan."

- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

<table>
<thead>
<tr>
<th><strong>NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROONENT</strong></th>
<th><strong>ELECTIVE OFFICE SOUGHT OR HELD</strong> (INCLUDE DISTRICT NUMBER IF APPLICABLE)</th>
<th><strong>YEAR OF ELECTION</strong></th>
<th><strong>PARTY</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Julian Gold M.D.</td>
<td>City Council</td>
<td>2020</td>
<td>☑ Nonpartisan</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>☐ Nonpartisan</td>
</tr>
</tbody>
</table>

**Primarily Formed Committee** Primarily formed to support or oppose specific candidates or measures in a single election. List below:

<table>
<thead>
<tr>
<th><strong>CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)</strong></th>
<th><strong>CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION</strong> (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)</th>
<th><strong>CHECK ONE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>SUPPORT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SUPPORT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OPPOSE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

---

**FPPC Form 410 (May/2017)**  
FPPC Advice: advice@fppc.ca.gov (866/275-3772)  
www.fppc.ca.gov