

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

| | |
|--|---|
| Date of election if applicable: (Month, Day, Year) _____ | <input type="checkbox"/> Amendment (Explain Below) _____ _____ |
|--|---|

| | |
|---|---|
| Date Stamp FILED JUL 18 2022 Redlands City Clerk | CALIFORNIA FORM 470 For Official Use Only |
|---|---|

1. Statement Covers Calendar Year 20 22 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Michael Gallagher

STREET ADDRESS
[REDACTED]

CITY STATE ZIP CODE
Redlands CA 92373

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
[REDACTED]

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Appointed City Council Member

| | |
|---|--------------------------------------|
| JURISDICTION (LOCATION) City of Redlands | DISTRICT NUMBER (IF APPLICABLE) 5 |
|---|--------------------------------------|

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 foregoing is true and correct.

Executed on July 18, 2022
DATE

By Michael Gallagher
SIGNATURE OF OFFICEHOLDER OR CANDIDATE