

Los Angeles City Ethics Commission

CONTROLLED COMMITTEE BANK ACCOUNT INFORMATION

CEC Form No. 14

A separate controlled committee checking account information form must be filed for each committee. The committee must list all accounts and authorized signatories on each account.

() CHECK IF THIS AN AMENDMENT

NAME OF CANDIDATE/OFFICEHOLDER _____

NAME OF COMMITTEE: _____

I.D.#: _____ Treasurer: _____ Phone: _____
Area Code and Number

Name of Bank/Institution: _____

Number and Street City State Zip Code

Account Number: _____

1. NAME OF ACCOUNT SIGNATORY: _____ Position Held: _____

Mailing Address City State Zip Code

Home Address City State Zip Code

Daytime telephone: _____
Area Code and Number

2. NAME OF ACCOUNT SIGNATORY: _____ Position Held: _____

Mailing Address City State Zip Code

Home Address City State Zip Code

Daytime telephone: _____
Area Code and Number

3. NAME OF ACCOUNT SIGNATORY: _____ Position Held: _____

Mailing Address City State Zip Code

Home Address City State Zip Code

Daytime telephone: _____
Area Code and Number

4. NAME OF ACCOUNT SIGNATORY: _____ Position Held: _____

Mailing Address City State Zip Code

Home Address City State Zip Code

Daytime telephone: _____
Area Code and Number