

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

Date of election if applicable: (Month, Day, Year)  
 11/06/2018

Amendment (Explain Below)



1. Statement Covers Calendar Year 20 \_\_\_\_\_ .

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
 William J. Franklin

STREET ADDRESS  
 996 Lunar Lane

CITY STATE ZIP CODE  
 Banning CA 92220

AREA CODE/DAYTIME PHONE NUMBER  
 951-922-3612

OPTIONAL: FAX / E-MAIL ADDRESS

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
 4th District, Banning City Council

JURISDICTION (LOCATION)  
 North of Wilson, West of San Geronio

DISTRICT NUMBER (IF APPLICABLE)  
 4

**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
None		

**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 10/26/2018  
 DATE

By William J. Franklin  
 SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Clear Form

Print Form