Officeholder and Candidate Campaign Statement – Short Form

Date of election if applicable: (Month, Day, Year)	☐ Amendment (Explain Below)	Date Stamp	CALIFORNIA FORM 470
11/03/2026		CITY OF UKIAH RECEIVED OCT 15 2026 CITY CLERK UKIAH, CALIFORNIA	For Official Use Only

1. Statement Covers Calendar Year 20 26 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

JohnStrangio

STREET ADDRESS

[redacted]

CITY | STATE | ZIP CODE

Ukiah | ca | 95482

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

707-367-0043

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Ukiah City Council

JURISDICTION (LOCATION) | DISTRICT NUMBER (IF APPLICABLE)

Ukiah |

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
John Strangio for Ukiah	3101 S. State st. Ukiah ca 95482	John Strangio

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 10/15/2026 (DATE)

By [redacted] (SIGNATURE OF OFFICEHOLDER OR CANDIDATE)

Officeholder and Candidate Campaign Statement Form 470 Supplement

☐ **Amendment** (Explain Below)

Date Stamp

CALIFORNIA FORM **470** SUPPLEMENT

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

This form is written notification that the officeholder/candidate listed below has received contributions totaling $2,000 or more or has made expenditures of $2,000 or more during the calendar year.

1. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

John Strangio

STREET ADDRESS

CITY | STATE | ZIP CODE

Ukiah | ca | 95482

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

707-367-0043

2. Office Sought

OFFICE SOUGHT

UKiah City Council

DISTRICT NUMBER (IF APPLICABLE)

DATE OF ELECTION (MONTH, DAY, YEAR)

11/03/2026

3. Date Contributions Totaling $2,000 or More Were Received or Date Expenditures of $2,000 or More Were Made

10/13/2026

(MONTH, DAY, YEAR)