

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
GUTIERREZ BRIAN

1. Office, Agency, or Court

Agency Name (Do not use acronyms)  
CITY OF WEST COVINA  
Division, Board, Department, District, if applicable  
CITY COUNCIL, DISTRICT 1  
Your Position  
COUNCILMEMBER

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)  
 Multi-County \_\_\_\_\_  County of \_\_\_\_\_  
 City of WEST COVINA  Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

Annual: The period covered is January 1, 2023, through December 31, 2023.  
-or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2023.  
 Assuming Office: Date assumed 12 / 05 / 2024  
 Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one circle.)  
 The period covered is January 1, 2023, through the date of leaving office.  
-or-  
 The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.  
 Candidate: Date of Election \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary (required)

► Total number of pages including this cover page: \_\_\_\_\_

Schedules attached

Schedule A-1 - Investments - schedule attached  Schedule C - Income, Loans, & Business Positions - schedule attached  
 Schedule A-2 - Investments - schedule attached  Schedule D - Income - Gifts - schedule attached  
 Schedule B - Real Property - schedule attached  Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.  
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 12/05/2024  
(month, day, year)

Signature \_\_\_\_\_