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CAMPAIGN FINANCE

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Officeholder and Candidate
Campaign Statement -
Short Form

Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	Date Stamp	CALIFORNIA FORM 470 For Official Use Only

1. Statement Covers Calendar Year 2021

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Yvette Stevenson-Rodriguez

STREET ADDRESS

CITY Whittier STATE CA ZIP CODE 90604

AREA CODE/DAYTIME PHONE NUMBER (562)325-8216 OPTIONAL FAX/E-MAIL ADDRESS ysr@odwd.org

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Director, Member of the Board.

JURISDICTION (LOCATION) Orchard Dale Water District DISTRICT NUMBER (IF APPLICABLE)

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
<u>N/A</u>		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate all reasonable diligence in preparing this statement. I certify under penalty of perjury that the information provided is true and correct.

Executed on 7/23/2021 DATE