

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

<p>Date of election if applicable: (Month, Day, Year)</p> <p style="text-align: center; font-size: 1.5em;">N/A</p>	<p><input type="checkbox"/> Amendment (Explain Below)</p> <hr/> <hr/>
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<p>Date Stamp</p> <p>RECEIVED LOS ANGELES COUNTY ③ 7/19/23 2023 JUL 24 PM 1:47</p> <p>CAMPAIGN FINANCE DISCLOSURE SECTION</p>	<p>CALIFORNIA FORM 470</p> <p>For Official Use Only</p>
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1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Veronica Castillo

STREET ADDRESS

STATE ZIP CODE

South El Monte CA 91733

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

626-806-2605

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Trustee

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)

Valle Lindo School District (South El Monte)

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>Friends To Elect Veronica Castillo For School Board</u>	<u>11337 Byways Street, South El Monte, CA 91733</u>	<u>Myself</u>

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 July 19, 2023 DATE