

Officeholder and Candidate
Campaign Statement -
Short Form

4 DC Date Stamp
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LOS ANGELES COUNTY
2022 JUL 19 AM 9:08
CAMPAIGN FINANCE

CALIFORNIA FORM 470
For Official Use Only

Date of election if applicable:
(Month, Day, Year)

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Nancy A Swenson

CITY STATE ZIP CODE
Downey CA 90241

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
(562) 619-3887

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Board of Trustee #5 Downey Unified

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Downey CA 5

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

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 information furnished is true and correct.

Executed on 7/19/2022 DATE