

RECEIVED BY
 LOS ANGELES COUNTY
 8/23/22
 2022 AUG 25 AM 11:35
 CAMPAIGN FINANCE

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 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Danielle Soto

UNIT
909-621-5568

AREA CODE/DAYTIME PHONE NUMBER

STATE
Pennsylvania

ZIP CODE
91766

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Director

JURISDICTION (LOCATION)
Three Valleys Municipal Water District

DISTRICT NUMBER (IF APPLICABLE)
6

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 ID. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER
N/A	N/A	N/A
N/A	N/A	N/A

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

Executed on 8/22/2022
 DATE

By _____