

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

7/21/23 (1)

<p style="text-align: center; font-size: small;">Date Stamp</p> <p style="text-align: center; font-size: x-small;">RECEIVED BY LOS ANGELES COUNTY</p> <p style="text-align: center; font-size: x-small;">2023 JUL 24 PM 1:53</p> <p style="text-align: center; font-size: x-small;">CAMPAIGN FINANCE DISCLOSURE SECTION</p>	<p>CALIFORNIA FORM 470</p> <p style="font-size: x-small;">For Official Use Only</p>
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<p style="font-size: x-small;">Date of election if applicable: (Month, Day, Year)</p> <p style="text-align: center; font-size: x-small;">11-08-22</p>	<p><input type="checkbox"/> Amendment (Explain Below)</p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/>
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1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

3. Office Sought or Held

NAME OF OFFICEHOLDER OR CANDIDATE

Sandra Benavides

STREET ADDRESS

CITY	STATE	ZIP CODE
Azusa	CA	91702

AREA CODE/DAYTIME PHONE NUMBER

909-297-9953

OPTIONAL: FAX / E-MAIL ADDRESS

OFFICE SOUGHT OR HELD

School Board-Azusa Unified School District Trustee Area 3

JURISDICTION (LOCATION)	DISTRICT NUMBER (IF APPLICABLE)
Los Angeles County	3

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
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 all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws

that I have used

Executed on July 21, 2023
DATE