

Officeholder and Candidate
Campaign Statement -
Short Form

8/12/21 ①

Date Stamp

CALIFORNIA FORM 470

For Official Use Only

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

Amendment (Explain Below)

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2021 AUG 16 PM 2:29
CAMPAIGN FINANCE

1. Statement Covers Calendar Year 20 21.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Jennifer De Baca Sandoval

STREET ADDRESS

Whittier CA 90601

CITY

STATE

ZIP CODE

(562) 822-5028

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Whittier City School District BOE

JURISDICTION (LOCATION)

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

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 in contributions during the calendar year covered by this statement. I certify under penalty of perjury under the laws of the State of California that I have used all reasonable diligence in preparing this statement.

I have used

Executed on 08/02/21 DATE

By _____