

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

7/24/23 (3)

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

Amendment (Explain Below)

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DISCLOSURE SECTION

CALIFORNIA FORM 470

For Official Use Only

1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE  
Virginia L. Baxter  
STREET ADDRESS  
CITY  
562-477-0849  
AREA CODE/DAYTIME PHONE NUMBER  
STATE CA ZIP CODE 90808  
OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD  
Long Beach Community College District Board  
JURISDICTION (LOCATION) Long Beach, Ca  
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
<u>none</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 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.

7/22/23  
DATE