

Officeholder and Candidate Campaign Statement - Short Form

07/26/2023

Date of election if applicable: (Month, Day, Year) November 2020

Amendment (Explain Below)

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1. Statement Covers Calendar Year 2022

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE: Sonia Lopez
STREET ADDRESS:
CITY: South Gate STATE: CA ZIP CODE: 90280
AREA CODE/DAYTIME PHONE NUMBER: 3109199593
OPTIONAL: FAX / E-MAIL ADDRESS: LOPEZFORCOLLEGEBOARD

3. Office Sought or Held

OFFICE SOUGHT OR HELD: Trustee
JURISDICTION (LOCATION): Compton College Board of Trustees
DISTRICT NUMBER (IF APPLICABLE): 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.

Table with 3 columns: 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 all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of th

r and that I have used

Executed on 7/25/2023 DATE

By.