

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

4ce

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

Amendment (Explain Below)

Date Stamp
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LOS ANGELES COUNTY
2022 AUG -2 PM 3:43
CAMPAIGN FINANCE

CALIFORNIA FORM 470
For Official Use Only

1. Statement Covers Calendar Year 20 22.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Lenet Pacheco

STREET ADDRESS

CITY

Baldwin Park

STATE

CA

ZIP CODE

91704

AREA CODE/DAYTIME PHONE NUMBER

626 626 3114

OPTIONAL: FAX/ E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Valley Water District

JURISDICTION (LOCATION)

Baldwin Park

DISTRICT NUMBER
(IF APPLICABLE)

N/A

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>		
<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 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 California that the information provided is true and correct.

Executed on

8/2/2022
DATE

By X

SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Clear Form

Print Form