

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

Date Stamp	CALIFORNIA FORM 470
RECEIVED BY LOS ANGELES COUNTY	For Official Use Only
2023 AUG -7 PM 2:37	

Date of election if applicable: (Month, Day, Year) <hr/>	<input type="checkbox"/> Amendment (Explain Below) <hr/> <hr/>
--	--

1. Statement Covers Calendar Year 20 23.

CAMPAIGN FINANCE
DISCLOSURE SECTION

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Larry Rodriguez

STREET ADDRESS

CITY STATE ZIP CODE
South El Monte CA 91733

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
626-692-3474

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Valle Lindo School Board Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Valle Lindo School District (South El Monte)

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 and that I will spend 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 the State of California that the foregoing is true and correct.

Executed on 7/19/2023
DATE