

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

10/5/23 (1)

5723

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

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 Amendment (Explain Below)
2023 OCT 11 PM 2:2
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1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Shelley Sorsabal

STREET ADDRESS

CITY

Buckeye

AREA CODE/DAYTIME PHONE NUMBER

STATE

AZ

ZIP CODE

85396

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Antelope Valley-East Kern Watet District Director Division 1

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
Committe to Elect Sorsabal for Water 2018	, Buckeye, AZ 85396	Shelley Sosabal

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 August 31, 2023
DATE

By _____
CANDIDATE