

Officeholder and Candidate
Campaign Statement –
Short Form

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

11/03/2020

☐ Amendment (Explain Below)

4DC

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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

Raymond Rodriguez

STREET ADDRESS

CITY

Pico Rivera

AREA CODE/DAYTIME PHONE NUMBER

714-269-3250

STATE

CA

ZIP CODE

90660

OPTIONAL: FAX / E-MAIL ADDRESS

rmreeguez@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Director, Pico Water District

JURISDICTION (LOCATION)

Pico Rivera 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
NONE		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive the
all reasonable diligence in preparing this statement. I certify under penalty of perjury under the law

Executed on 09/22/2022

DATE