

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

No Postmark

Date of election if applicable: (Month, Day, Year) 11/8/2022	<input type="checkbox"/> Amendment (Explain Below) _____ _____	Date Stamp RECEIVED BY LOS ANGELES COUNTY 2022 SEP 28 PM 3:28 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only 019650

1. Statement Covers Calendar Year 20 22 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Miguel S. Coronado

STREET ADDRESS

CITY STATE ZIP CODE
Lancaster CA 93536

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
661-466-6810 drmc coronado@icloud.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Antelope Valley Community College Governing Board of Trustee Area no. 2

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Los Angeles County 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.

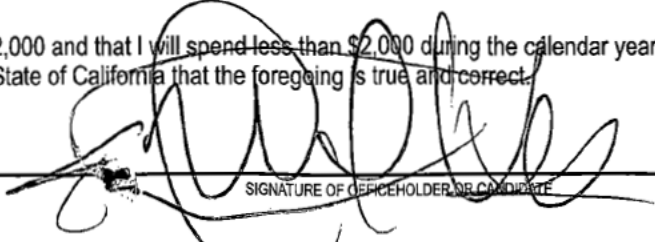
COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER

5. Verification

I declare
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I acknowledge 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 this form in accordance with the laws of the State of California that the foregoing is true and correct.

9-26-2022

By 
 SIGNATURE OF OFFICEHOLDER OR CANDIDATE