

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

7/27/22 (1)

Date Stamp RECEIVED BY LOS ANGELES COUNTY 2022 JUL 29 PM 3: 56 CAMPAIGN FINANCE	CALIFORNIA FORM 470 For Official Use Only
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Date of election if applicable: (Month, Day, Year) November 2020	<input type="checkbox"/> Amendment (Explain Below) _____ _____
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1. Statement Covers Calendar Year 20 ²² .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
 SONIA LOPEZ

STREET ADDRESS

CITY	STATE	ZIP CODE
SOUTH GATE	CA	90280

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

5625295835 LOPEZFORCOLLEGEBOARD

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Trustee

JURISDICTION (LOCATION)	DISTRICT NUMBER (IF APPLICABLE)
Compton College Board of Trustees	3

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 St

Executed on 7/26/2022 DATE By _____