

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

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

November 3, 2020

Amendment (Explain Below)

Date Stamp
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**CALIFORNIA
FORM 470**
For Official Use Only

1. Statement Covers Calendar Year 20 23.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Erik Venegas
STREET ADDRESS

CITY STATE ZIP CODE
West Covina CA 91792
AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
626 465-9358

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Rowland Unified School District, Board Member, Trustee Area 2
JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
NA 2

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
NA	NA	NA
NA	NA	NA

5. Verification

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

Executed on 7/29/2023
DATE