

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

(2) TM

Date Stamp RECEIVED BY LOS ANGELES COUNTY 2023 JUL 31 PM 1:00 CAMPAIGN FINANCE	CALIFORNIA FORM 470 <small>For Official Use Only</small>
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Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)

1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information NAME OF OFFICEHOLDER OR CANDIDATE <u>Ralph Galvan</u> <hr/> STREET ADDRESS <hr/> CITY <u>Baldwin Park</u> STATE <u>CA</u> ZIP CODE <u>91706</u> AREA CODE/DAYTIME PHONE NUMBER <u>(626) 869-7702</u> OPTIONAL: FAX / E-MAIL ADDRESS <u>Ralph@ralphgalvan.com</u>	3. Office Sought or Held OFFICE SOUGHT OR HELD <u>Valley County Water District</u> JURISDICTION (LOCATION) <u>VA County</u> DISTRICT NUMBER (IF APPLICABLE)
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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
<u>Ralph Galvan for Baldwin Park City Council 2022</u>	<u>Baldwin Park CA 91706</u>	<u>Ralph Galvan</u>

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 information provided is true and correct.

Executed on _____ By _____

SIGNATURE OF OFFICEHOLDER OR CANDIDATE