

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

5724

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

Amendment (Explain Below)

Date Stamp
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CAMPAIGN FINANCE

CALIFORNIA FORM 470
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1. Statement Covers Calendar Year 20 24

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Nancy A. Swenson

STREET ADDRESS

CITY STATE ZIP CODE
Downey CA 90241

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
~~562-691-3612~~ 562-619-3887

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Governing Board of Education Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Downey Unified School District 5

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

Executed on July 22, 2024
DATE

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FPPC Form 470/470 Supplement (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
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