

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

9/22/24 (1)

Date of election if applicable: (Month, Day, Year)  11/08/2022	<input type="checkbox"/> <b>Amendment</b> (Explain Below)  _____ _____
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Date Stamp RECEIVED LOS ANGELES COUNTY 2024 JUL 24 AM 11:19 CAMPAIGN FINANCE	CALIFORNIA FORM <b>470</b> For Official Use Only
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1. Statement Covers Calendar Year 20 24

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
 Victor Caballero

STREET ADDRESS  
 \_\_\_\_\_

CITY STATE ZIP CODE  
 PICO RIVERA CA. 90660

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
 562-2736931 yctrcaballero@gmail.com

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
 BOARD VICE PRESIDENT

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
 PICO WATER DISTRICT, PICO RIVERA

**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
N/A		
N/A		

**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 foregoing is true and correct.

Executed on 07/17/2024 DATE B) \_\_\_\_\_ HOLDER OR CANDIDATE