

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

4BH

Date Stamp <b>RECEIVED BY LOS ANGELES CO</b>	<b>CALIFORNIA FORM</b>	<b>470</b>
2024 JUL 18 AM 10:59	For Official Use Only	
<b>CAMPAIGN FINANCE</b>		

Date of election if applicable: (Month, Day, Year)  <u>November 12, 2024</u>	<input type="checkbox"/> <b>Amendment</b> (Explain Below) <hr/>
---	--

1. Statement Covers Calendar Year 20 24

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
VANESSA HSU

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

CITY STATE ZIP CODE  
WEST COVINA CA 91792

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
626-353-4215 vhsu@rwid.org

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
DIRECTOR, DIVISION 1

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
ROWLAND WATER DISTRICT

**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 State of California that the foregoing is true and correct.

Executed on 7/17/2024 DATE

By \_\_\_\_\_ CANDIDATE