

Officeholder and Candidate
Campaign Statement -
Short Form

(9) DC S724

<small>Date Stamp</small> RECEIVED BY LOS ANGELES COUNTY 2024 JUL 25 AM 10:08 CAMPAIGN FINANCE	CALIFORNIA FORM 470 <small>For Official Use Only</small> 018451
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Date of election if applicable:
(Month, Day, Year)

11/05/2024

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
HARRIS S. MATAA LII

STREET ADDRESS
MONTEBELLO, CA 90640

CITY
(323) 440-4994

AREA CODE/DAYTIME PHONE NUMBER STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held South Montebello Irrig Dist

OFFICE SOUGHT OR HELD
DIRECTOR, DIVISION 3

JURISDICTION (LOCATION)
SOUTH MONTEBELLO, CA

DISTRICT NUMBER (IF APPLICABLE)

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>NONE</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 foregoing is true and correct.

Executed on JULY 24, 2024 DATE

By _____ SIGNATURE OF OFFICEHOLDER OR CANDIDATE