

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

4 DC

5724

<p>Date of election if applicable: (Month, Day, Year)</p> <p><u>11/08/2022</u></p>	<p><input type="checkbox"/> <b>Amendment</b> (Explain Below)</p> <p>_____</p> <p>_____</p>	<p>Date Stamp <b>RECEIVED BY</b> LOS ANGELES COU 2024 JUL 30 AM 10:56 CAMPAIGN FINANCE</p>	<p><b>CALIFORNIA FORM 470</b></p> <p>For Official Use Only</p> <p>020457</p>
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1. Statement Covers Calendar Year 20 24

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Jazmin Lopez Leos

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

CITY  
Irwindale

STATE  
CA

ZIP CODE  
91706

AREA CODE/DAYTIME PHONE NUMBER  
(626) 422-2946

OPTIONAL: FAX / E-MAIL ADDRESS  
\_\_\_\_\_

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
Valley County Water District Director

JURISDICTION (LOCATION)  
Baldwin Park

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

**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 an all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of

that I have used

Executed on 7/22/2024  
DATE

By \_\_\_\_\_