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

| Date of election if applicable: (Month, Day, Year) | ☐ Amendment (Explain Below) | Date Stamp | CALIFORNIA FORM 470 |
|---|---|---|---|
| 11/08/2022 | | RECEIVED BY LOS ANGELES COUNTY 2023 AUG -2 AM 11:31 CAMPAIGN FINANCE DISCLOSURE SECTION | For Official Use Only |

1. **Statement Covers Calendar Year 20** 23.

2. **Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE: Alma Rodriguez

STREET ADDRESS:

CITY: Littlerock | STATE: A | ZIP CODE: 93543

AREA CODE/DAYTIME PHONE NUMBER: (661) 208 9143

OPTIONAL: FAX / E-MAIL ADDRESS: arodriguez8215@yahoo.com

3. **Office Sought or Held**

OFFICE SOUGHT OR HELD: Governing Board Member

JURISDICTION (LOCATION): School District Keppel Union School District

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 |
|---|---|---|
| N/A | N/A | N/A |
| N/A | 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 7/31/2023
DATE