

**Officeholder and Candidate  
Campaign Statement  
Form 470 Supplement**

SEE INSTRUCTIONS ON REVERSE

This form is written notification that the officeholder/candidate listed below has received contributions totaling \$2,000 or more or has made expenditures of \$2,000 or more during the calendar year.

<input checked="" type="checkbox"/> <b>Amendment</b> (Explain Below) Raised over \$2,000.00  
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① 02/21/2024  
RECEIVED BY  
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2024 FEB 22 AM 11:16  
CAMPAIGN FINANCE

CALIFORNIA FORM 470 SUPPLEMENT
For Official Use Only 014568

**1. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE John Quintanilla		
STREET ADDRESS		
CITY Rosemead	STATE CA	ZIP CODE 91770
AREA CODE/DAYTIME PHONE NUMBER 626-676-3333	OPTIONAL: FAX / E-MAIL ADDRESS	

**2. Office Sought**

OFFICE SOUGHT Pasadena City College Trustee Area #6	DISTRICT NUMBER (IF APPLICABLE) 6
DATE OF ELECTION (MONTH, DAY, YEAR) 3/5/2024	

**3. Date Contributions Totalling \$2,000 or More Were Received or Date Expenditures of \$2,000 or More Were Made**

2/10/2024  
(MONTH, DAY, YEAR)