

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

<p>Date of election if applicable: (Month, Day, Year)</p> <p><u>11/20</u> <u>11/28/2023</u></p>	<p><input type="checkbox"/> Amendment (Explain Below)</p>	<p>Date Stamp</p> <p>RECEIVED BY LOS ANGELES COUNTY 2023 JUL 31 PM 4:27 CAMPAIGN FINANCE</p>	<p>CALIFORNIA FORM 470</p> <p>For Official Use Only</p>
-----------------------------------------------------------------------------------------------------	-----------------------------------------------------------	----------------------------------------------------------------------------------------------------------	----------------------------------------------------------------

1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Yesenia Maria Cuarenta

STREET ADDRESS
Paramount

CITY STATE ZIP CODE
CA 90723

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
(562) 588-8448

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Paramount Unified School District

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Paramount, CA

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
[Handwritten scribbles covering the table content]		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws

calendar year and that I have used this form for the

Executed on 7/31/2023
DATE

DATE