

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

<p>Date of election if applicable: (Month, Day, Year)</p> <p><u>11/8/2022</u></p>	<p><input type="checkbox"/> Amendment (Explain Below)</p>	<p>Date Stamp</p> <p>RECEIVED BY LOS ANGELES COUNTY ASS 2022 OCT 7 AM 10:42 CAMPAIGN FINANCE</p>	<p>CALIFORNIA FORM <b>470</b></p> <p>For Official Use Only</p>
---	---	--	--

1. Statement Covers Calendar Year 20 22.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE  
Christina Flores

STREET ADDRESS  
CA 91731

CITY  
El Monte

AREA CODE/DAYTIME PHONE NUMBER  
626-616-9234

OPTIONAL: FAX / E-MAIL ADDRESS  
Flores\_c72@ykbm.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD  
El Monte City School District Board

JURISDICTION (LOCATION)  
El Monte, CA Board member

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>Flores For El Monte City School Board</u>	<u>El Monte, CA 91731</u>	<u>Jose Mejia</u>

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 of

calendar year and that I have used

Executed on 10/7/2022  
DATE

DATE