

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

7/28/22 ①

5722

Date of election if applicable:
(Month, Day, Year)
11/3/20

Amendment (Explain Below)

Date Stamp
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CAMPAIGN FINANCE

CALIFORNIA FORM **470**
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1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

VLADIMIR GOMEZ

STREET ADDRESS

CITY

PALMDALE

AREA CODE/DAYTIME PHONE NUMBER

6615479855

STATE

CA

ZIP CODE

93591

OPTIONAL: FAX / E-MAIL ADDRESS

VEG366@GMAIL.COM

3. Office Sought or Held

OFFICE SOUGHT OR HELD

WILSONA SCHOOL DISTRICT TRUSTEE

JURISDICTION (LOCATION)

LOS ANGELES COUNTY

DISTRICT NUMBER
(IF APPLICABLE)

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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 and that I will expend 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 law that the information provided is true and correct.

Executed on

7/28/22
DATE