

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

Date Stamp	CALIFORNIA FORM 470
RECEIVED BY LOS ANGELES COUNTY 7/21/23 2023 JUL 24 PM 1:48 CAMPAIGN FINANCE DISCLOSURE SECTION	
For Official Use Only	

Date of election if applicable: (Month, Day, Year)	<input type="checkbox"/> Amendment (Explain Below)

1. Statement Covers Calendar Year 20 23.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Jacqueline Rubio

STREET ADDRESS

CITY
So el Monte

STATE
CA

ZIP CODE
91733

AREA CODE/DAYTIME PHONE NUMBER
426. 848-2484

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Valle Lindo School Board

JURISDICTION (LOCATION)
Valle Lindo 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
<u>Friends to Elect Jackie Rubio</u> ID# <u>1454291</u>	<u>1248 Esteban Torres Dr. S. El Monte CA 91733</u>	<u>Jacqueline Rubio</u>

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 7/19/2023
DATE

By _____
SIGNATURE OF OFFICEHOLDER OR CANDIDATE