

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

July 4

5724

Date of election if applicable:
(Month, Day, Year)

Amendment (Explain Below)

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CAMPAIGN FINANCE

CALIFORNIA FORM **470**

For Official Use Only

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1. Statement Covers Calendar Year 20 24

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Armando Barajas

CITY

La Bente

AREA CODE/DAYTIME PHONE NUMBER

626-6386446

STATE

ZIP CODE

CA 91746

OPTIONAL: FAX/E-MAIL ADDRESS

barajas1@riseup.net

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Bassett USD

JURISDICTION (LOCATION)

Bassett

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

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

7/30/24

DATE

By

DATE

M3