


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

 JUL 15 2024 Imperial County	CALIFORNIA FORM 470
	For Official Use Only

Date of election if applicable: (Month, Day, Year) <u>11/5/24</u>	<input type="checkbox"/> Amendment (Explain Below) _____ _____
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1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Richard B Silva

STREET ADDRESS
120 E. Main St Ca 92249

CITY STATE ZIP CODE

761996-3772 Richard Silva 21063-Yahoo.com

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
HEGER Public Utility District

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)

Imperial

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 7/15/24 DATE

By  SIGNATURE OF OFFICEHOLDER OR CANDIDATE