


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


CALIFORNIA FORM 470
 For Official Use Only

JUL 24 2024
 Imperial County

Date of election if applicable:
 (Month, Day, Year)
November 5, 2024

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Ruben Villa

STREET ADDRESS
343 I Street

CITY STATE ZIP CODE
Brawley CA 92227

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
760-604-8654 ruben.villa@bescd@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Brawley Elementary School District Trustee

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Brawley, California

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
N/A		

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 July, 24, 2024
DATE

By 
SIGNATURE OF OFFICEHOLDER OR CANDIDATE