

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

Registrar  
of Voters

CALIFORNIA  
FORM **470**

<p>Date of election if applicable: (Month, Day, Year)</p> <p><u>Nov. 5, 2024</u></p>	<p><input type="checkbox"/> Amendment (Explain Below)</p> <p>_____</p> <p>_____</p>
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JUL 24 2024

Imperial  
County

For Official Use Only

1. Statement Covers Calendar Year 20 24.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Audrey Noriega

STREET ADDRESS  
226 Appaloosa St

CITY STATE ZIP CODE  
Brawley CA 92207

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

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
Brawley Union High School District

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
Imperial County

**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 7/24/24 DATE

By [Signature] SIGNATURE OF OFFICEHOLDER OR CANDIDATE