

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

**Registrar
of Voters**
JUL 26 2024
Imperial
County

CALIFORNIA FORM	470
For Official Use Only	

Date of election if applicable: (Month, Day, Year) <div style="font-size: 1.5em; text-align: center;">11/05/2024</div>	<input type="checkbox"/> Amendment (Explain Below) <hr/> <hr/>
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1. Statement Covers Calendar Year 20 24 .


<p>2. Officeholder or Candidate Information</p> <p><small>NAME OF OFFICEHOLDER OR CANDIDATE</small> Bethamee Garcia</p> <p><small>STREET ADDRESS</small> 23 E. Main Street</p> <p><small>CITY</small> Heber <small>STATE</small> CA <small>ZIP CODE</small> 92249</p> <p><small>AREA CODE/DAYTIME PHONE NUMBER</small> 760-604-2389 <small>OPTIONAL: FAX / E-MAIL ADDRESS</small> N/A</p>	<p>3. Office Sought or Held</p> <p><small>OFFICE SOUGHT OR HELD</small> Heber Elementary School Board District</p> <p><small>JURISDICTION (LOCATION)</small> Heber / Imperial County <small>DISTRICT NUMBER (IF APPLICABLE)</small> N/A</p>
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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	N/A	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 7/26/24 DATE By  SIGNATURE OF OFFICEHOLDER OR CANDIDATE