

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

Registrar
of Voters
Date Stamp

AUG 02 2024

Imperial
County

CALIFORNIA
FORM 470

For Official Use Only

Date of election if applicable: (Month, Day, Year) <i>11/05/2024</i>	<input type="checkbox"/> Amendment (Explain Below) _____ _____
--	--

1. Statement Covers Calendar Year 20 24.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
James Garcia

STREET ADDRESS
1210 New Rd

CITY STATE ZIP CODE
El Centro CA 92243

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

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Trustee

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Seeley Union School District

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 *8/02/2024*
DATE

By *[Signature]*
SIGNATURE OF OFFICEHOLDER OR CANDIDATE