

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

Date Stamp Registrar of Voters JUL 18 2024	CALIFORNIA FORM 470 <small>For Official Use Only</small>
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Amendment (Explain Below)

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

1. **Statement Covers Calendar Year** 2024. Imperial County

2. **Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE: Peter Martinez

STREET ADDRESS: 1226 W. Murphy Rd Imperial Ca 92251

CITY: Imperial STATE: CA ZIP CODE: 92251

AREA CODE/DAYTIME PHONE NUMBER: (760) 791-0087 OPTIONAL: FAX / E-MAIL ADDRESS: _____

3. **Office Sought or Held**

OFFICE SOUGHT OR HELD: _____

JURISDICTION (LOCATION): Imperial Valley College Area 3

DISTRICT NUMBER (IF APPLICABLE): # 3

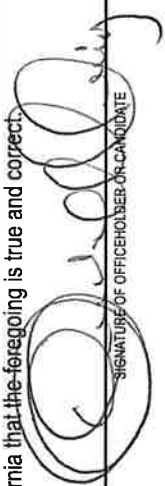
4. **Committee Information**
List all committees that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER
<u>W/A</u>		

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 7/18/2024 DATE

By  SIGNATURE OF OFFICEHOLDER OR CANDIDATE