

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

CALIFORNIA  
FORM **470**

For Official Use Only

Registrar  
of Voters

AUG 07 2024

Imperial  
County

Amendment (Explain Below)

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

11-5-2024

1. Statement Covers Calendar Year 20 24.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

Shawn Bennett

STREET ADDRESS

55 Sunset Way

CITY

CA

STATE

92266

ZIP CODE

619-807-2689

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD

Director Palo Verde Water District

JURISDICTION (LOCATION)

DISTRICT NUMBER  
(IF APPLICABLE)

**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 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.

8-7-2024

DATE

By Shawn Bennett

SIGNATURE OF OFFICEHOLDER OR CANDIDATE