

Officeholder and Candidate
Campaign Statement –
Short Form

Date Stamp RECEIVED	CALIFORNIA FORM 470
JUL 26 2024	
For Official Use Only	
KINGS COUNTY ELECTIONS	

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

2. Officeholder or Candidate Information

3. Office Sought or Held

NAME OF OFFICEHOLDER OR CANDIDATE
MARTIN L MALDONADO

STREET ADDRESS
[REDACTED]

CITY San Joaquin STATE CA ZIP CODE 93204

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

OFFICE SOUGHT OR HELD
West Hills College ASC 3

JURISDICTION (LOCATION)
Kings county

DISTRICT NUMBER (IF APPLICABLE)
3

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
<u>n/a</u>		
<u>n/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 7-26-24 DATE

By [REDACTED SIGNATURE] / SIGNATURE OF OFFICEHOLDER OR CANDIDATE