Date of election if applicable: (Month, Day, Year)	Amendment (Explain Below)	RECEIVED SEP 1 7 2024	CALIFORNIA 470 FORM For Official Use Only
		INGS COUNTY ELECTIONS	
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STATE ZIP CODE A 9323 OPTIONAL: FAX/E-MAIL ADDRESS	JURISDICTION (LOCATION)	, , , , , ,	DISTRICT NUMBER (IF APPLICABLE)
hat are primarily formed to reco	eive contributions or to make expendi COMMITTEE ADDRESS		OF TREASURER
knowledge I anticipate that I will r ertify under penalty of perjury und	receive less than \$2,000 and that I will sp der the laws of the State of California that By	the foregoing is true and correct.	
	(Month, Day, Year) STATE A Priority OPTIONAL: FAX/E-MAIL ADDRESS hat are primarily formed to recommon to the control of t	All entire in the primarily formed to receive contributions or to make expending committee address All entire in the primarily formed to receive contributions or to make expending committee address. All entire in the primarily formed to receive contributions or to make expending committee address. All entire in the primarily formed to receive less than \$2,000 and that I will specify under penalty of perjury under the laws of the State of California that	Date of election if applicable: (Month, Day, Year) Amendment (Explain Below) SEP 1 7 2024 SEP 1 7 2024 **CHARGS COUNTY ELECTIONS 3. Office Sought or Held OFFICE SOUGHT OR HELD JURISDICTION (COCATION) JURISDICTION (COCATION) And are primarily formed to receive contributions or to make expenditures on behalf of your candidate committee address NAME **Exercise Address** In the committee Address** In the commi