

7/25/23 (1)

Officeholder and Candidate  
Campaign Statement –  
Short Form

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

Amendment (Explain Below)

Date Stamp  
RECEIVED  
LOS ANGELES CA  
2023 JUL 27 PM 2:09  
CALIFORNIA FORM 470  
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CAMPAIGN FINANCE  
DISCLOSURE SECTION

1. Statement Covers Calendar Year 20 23

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE  
Cesar Barajas

STREET ADDRESS

CITY STATE ZIP CODE  
La Puente CA 91744

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS  
626-523-1229

3. Office Sought or Held

OFFICE SOUGHT OR HELD  
Director

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
La Puente Valley County Water District, LA County

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 expend 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

Executed on 7/24/23 DATE