

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

7/21/22 (3)

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

Amendment (Explain Below)

Date Stamp
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2022 JUL 25 PM 3:39
CAMPAIGN FINANCE

CALIFORNIA FORM 470
For Official Use Only

1. Statement Covers Calendar Year 20 22

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Martha E. Sodetani

STREET ADDRESS

CITY STATE ZIP CODE
Downey CA 90240

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
562-335-2826 msodetani@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Governing Board of Education Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
Downey Unified School District 1

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 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 t

Executed on 7/19/22 DATE

B: _____