## **Short Form** Campaign Statement -Officeholder and Candidate

Date of election if applicable: (Month, Day, Year) ☐ Amendment (Explain Belov C. CONTRACTOR VSTOOL

	Date Stamp	CALIFORNIA 170
		FORM
<u>*</u> )		For Official Use Only
	Control of the Contro	
	ROSE GALLO-VASQ	

Statement Covers Calendar Year 20

2	Officeholder or Candidate Information			ယ	3. Office Sought or Held	
	NAME OF OFFICEHOLDER OR CANDIDATE				OFFICE SOUGHT OR HELD	
	STEPHEN JAMES RICKERT				BOARD MEMBER, HOLTHOUSE WATER DISTRICT	
					JURISDICTION (LOCATION)	DISTRICT NUMBER
					DISTRICT	N/A
	CITY	STATE	ZIP CODE			
	MCARTHUR	CA	96056			
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: F	OPTIONAL: FAX / E-MAIL ADDRESS			
	530 336-6667					

## Committee Information

	None	COMMITTEE NAME AND I.D. NUMBER	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 ADDRESS	arily formed to receive contributions or to make expenditures or
~		NAME OF TREASURER	n behalf of your candidacy.

## رة. ا 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 \_\_ 12021 Ву

FPPC Form 470/470 Supplement (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov