Short Form Campaign Statement -Officeholder and Candidate Date of election if applicable: (Month, Day, Year) Amendment (Explain Below) COLUMN CLERK-RECORDER ROSE GALLO-VASQUE 8C 0 7 202 Date Stamp CALIFORNIA For Official Use Only

Statement Covers Calendar Year 20 22

Officeholder or Candidate Information		3. Office Sought or Held	
NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE SOUGHT OR HELD	
Juan Manuel Garcia Barajas		Pierce Joint Unified School District Board member	
		JURISDICTION (LOCATION)	DISTRICT NUMBER
		Arbuckle	(IF APPLICABLE)
A CALL COMPANY OF THE COMPANY OF THE CALL COMP	#P CODE		
Arbukle	CA 95912		
AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL: FAX / E-MAIL ADDRESS		
530-908-1391	jumagaba@hotmail.com		

Committee Information

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COMMITTEE NAME AND I.D. NUMBER COMMITTEE ADDRESS NAME OF	COMMITTEE ADDRESS	NAME OF TREASURER

ĊΙ Verification

Executed on .

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.

-	,		,				
9/29/2022							
DATE		1				74.756	

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Officeholder and Candidate Campaign Statement Form 470 Supplement	☐ Amendment (Explain Below)	Date Stamp	CALIFORNIA 470 FORM SUPPLEMENT
SEE INSTRUCTIONS ON REVERSE			For Official Use Only
This form is written notification that the officeholder/candidate listed below has received contributions totaling \$2,000 or more or has made expenditures of \$2,000 or more during the calendar year.	ntributions totaling \$2,000 or more or has		
1. Officeholder or Candidate Information			
NAME OF OFFICEHOLDER OR CANDIDATE			
STREET ADDRESS			
CITY	ZIP CODE		
AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS	-MAIL ADDRESS		
2. Office Sought			
OFFICE SOUGHT	DISTRICT NUMBER (IF APPLICABLE)	ER	
DATE OF ELECTION (MONTH, DAY, YEAR)			

3. Date Contributions Totaling \$2,000 or More Were Received or Date Expenditures of \$2,000 or More Were Made

(MONTH, DAY, YEAR)