# Officeholder and Candidate Campaign Statement - Short Form

| Date of election if applicable: (Month, Day, Year) | ☐ Amendment (Explain Below) | Date Stamp | CALIFORNIA FORM 470 |
|---|---|---|---|
| November 5th, 2024 | | FILED SENDY PEREZ, COUNTY CLERK JUL 23 2024 BY [signature] DEPUTY | For Official Use Only |

**1. Statement Covers Calendar Year 20** 24 .

## 2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Andrea Roach

STREET ADDRESS
[redacted]

CITY | STATE | ZIP CODE
Princeton | CA | 95970

AREA CODE/DAYTIME PHONE NUMBER | OPTIONAL: FAX / E-MAIL ADDRESS
530-517-0059 | aperez34@hotmail.com

## 3. Office Sought or Held

OFFICE SOUGHT OR HELD
Board Member

JURISDICTION (LOCATION) | DISTRICT NUMBER (IF APPLICABLE)
Princeton Joint Unified School District

## 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 the State of California that the foregoing is true and correct.

Executed on 7/19/2024 (DATE) By [redacted] (SIGNATURE OF OFFICEHOLDER OR CANDIDATE)

Clear Form | Print Form