

Officeholder and Candidate
Campaign Statement –
Short Form

Date of election if applicable:
(Month, Day, Year)
NOV. 8, 2022

Amendment (Explain Below)

Date Stamp
RECEIVED
2022 SEP 29 P 2 48
CITY OF SAN FERNANDO
CITY CLERK

CALIFORNIA FORM 470
For Official Use Only

1. Statement Covers Calendar Year 20 22 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
MARY SODRIO

STREET ADDRESS

CITY
San Fernando

STATE
CA

ZIP CODE
91340

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD
City Council

JURISDICTION (LOCATION)
San Fernando

DISTRICT NUMBER (IF APPLICABLE)

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
<u>SODRIO For City Council 2022</u> <u>1453657</u>	<u>San Fernando CA 91340</u>	<u>Andre Pnet</u>

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 9/29/2022 DATE

By [Signature] SIGNATURE OF OFFICEHOLDER OR CANDIDATE