

Officeholder and Candidate  
Campaign Statement –  
Short Form

Date of election if applicable: (Month, Day, Year)
11/8/2022

☐ Amendment (Explain Below)

Date Stamp <b>RECEIVED</b> 2022 SEP 29 PM 4:25 CITY OF SAN FERNANDO CITY CLERK	<b>CALIFORNIA FORM 470</b> For Official Use Only
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1. Statement Covers Calendar Year 20 22 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Victoria Garcia

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

Member of the City Council: San Fernando

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
Victoria Garcia for City Council 2022 ID No. 1453888	, San Fernando, CA 91340	Victoria Garcia

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 Victoria Garcia  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Officeholder and Candidate  
Campaign Statement  
Form 470 Supplement

SEE INSTRUCTIONS ON REVERSE

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.

☐ Amendment (Explain Below)

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2022 SEP 29 P 4:

CITY OF SAN FERNANDO  
CITY CLERK

CALIFORNIA  
FORM

470  
SUPPLEMENT

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1. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Victoria Garcia

STREET ADDRESS

CITY

STATE

ZIP CODE

San Fernando

CA

91340

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

(818) 939-7882

2. Office Sought

OFFICE SOUGHT

Member of the City Council: San Fernando

DISTRICT NUMBER  
(IF APPLICABLE)

DATE OF ELECTION (MONTH, DAY, YEAR)

11/8/2022

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

9/28/2022

(MONTH, DAY, YEAR)