

**Officeholder and Candidate
Campaign Statement –
Short Form**

Date of election if applicable:
(Month, Day, Year)
AUGUST 31, 2021

Amendment (Explain Below)

Date Stamp
FILED
MAY 26 2021
ROSE GALLO-VASQUEZ
COLUSA COUNTY CLERK-RECORDER

CALIFORNIA
FORM
470
For Official Use Only

1. Statement Covers Calendar Year 20 21 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
CERENA LEE

CITY _____ STATE _____ ZIP CODE _____

SHERWOOD OR 97140

AREA CODE/DAYTIME PHONE NUMBER _____ OPTIONAL: FAX/ E-MAIL ADDRESS _____

(503) 925-8560

3. Office Sought or Held

OFFICE SOUGHT OR HELD
BOARD MEMBER, HOLTHOUSE WATER DISTRICT

JURISDICTION (LOCATION)
DISTRICT _____

DISTRICT NUMBER
(IF APPLICABLE)
N/A

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 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 5/26/21 DATE

By _____