

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

Date Stamp <b>FILED</b> SENDRY PEREZ, COUNTY CLERK	<b>CALIFORNIA FORM 470</b>
<b>JAN 25 2023</b>	For Official Use Only
BY  DEPUTY	

Date of election if applicable: (Month, Day, Year)  _____	<input type="checkbox"/> <b>Amendment</b> (Explain Below)  _____  _____
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1. Statement Covers Calendar Year 20 23 . . .

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
Becky L Brummet

STREET ADDRESS

CITY STATE ZIP CODE

AREA CODE/DAYTIME PHONE NUMBER (530) 519-9649 OPTIONAL: FAX / E-MAIL ADDRESS becky.brummet@sbcglobal.net

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
School Board Member

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)  
Orland

**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>n/a</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 January 23, 2023  
DATE

By SIGNATURE OF OFFICEHOLDER OR CANDIDATE