

Officeholder and Candidate
Campaign Statement –
Short Form

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

Amendment (Explain Below)

Date Stamp
AUG 12,
2022

CALIFORNIA FORM 470

For Official Use Only
City of Grass Valley
125 E. Main St
Taylor Do

1. Statement Covers Calendar Year 20 22 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Hilary Hodge

STREET ADDRESS
329 Bennett Street

CITY STATE ZIP CODE
Grass Valley CA 95945

AREA CODE/DAYTIME PHONE NUMBER OPTIONAL: FAX / E-MAIL ADDRESS
925-216-3595

3. Office Sought or Held

OFFICE SOUGHT OR HELD
Council person

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)
City of Grass Valley

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 8/12/2022
DATE

By *[Signature]*
SIGNATURE OF OFFICEHOLDER OR CANDIDATE