

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

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

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**Amendment** (Explain Below)

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SENDA PEREZ, COUNTY CLERK  
JUL 25 2023  
BY: [REDACTED] DEPUTY

**CALIFORNIA FORM 470**  
For Official Use Only

1. Statement Covers Calendar Year 20 23.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

Becky L Brummet

STREET ADDRESS

[REDACTED]

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

(530) 519-9649

beckybrummet@shcglobal.net

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD

Orland School Board

JURISDICTION (LOCATION)

Orland

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>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

July 25, 2023

DATE

By

[REDACTED]

OFFICEHOLDER OR CANDIDATE

Clear Form

Print Form