

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

Date of election if applicable:
(Month, Day, Year)
11/3/20

Amendment (Explain Below)

RECEIVED
SEP 24 2020
City Clerk's Office
City of Los Alamitos

CALIFORNIA FORM 470
For Official Use Only

1. Statement Covers Calendar Year 20 20

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE
Jordan B. Nefulda

STREET ADDRESS
[REDACTED]

CITY STATE ZIP CODE
Los Alamitos CA 90720

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

3. Office Sought or Held

OFFICE SOUGHT OR HELD
City Council

JURISDICTION (LOCATION)
Los Alamitos

DISTRICT NUMBER (IF APPLICABLE)
3

4. Committee Information

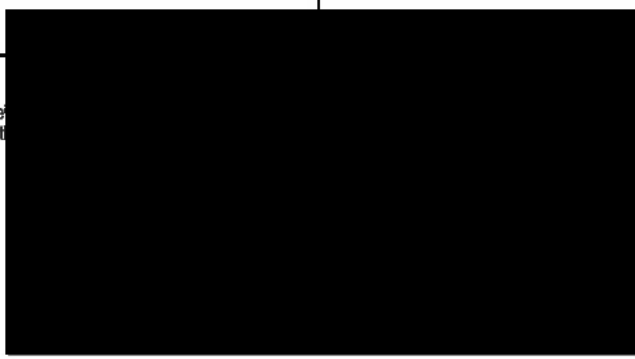
List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

| COMMITTEE NAME AND I.D. NUMBER | COMMITTEE ADDRESS | NAME OF TREASURER |
|--------------------------------|-------------------|-------------------|
| N/A | | |

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the information provided is true and correct to the best of my knowledge.

Executed on 9/24/20 DATE



at I have used

ment (Jan/2015)
(866)275-3772
www.fppc.ca.gov