

Officeholder and Candidate
Campaign Statement –
Short Form

Date of election if applicable: (Month, Day, Year)
<u>11-8-22</u>

☐ Amendment (Explain Below)

RECEIVED

AUG 16 2022

City Clerk's Office
City of Hughson

CALIFORNIA
FORM

470

For Official Use Only

1. Statement Covers Calendar Year 20 22.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Randy Crooker

STREET ADDRESS

CITY

Hughson

STATE

CA

ZIP CODE

95326

AREA CODE/DAYTIME PHONE NUMBER

(209) 614-3003

OPTIONAL: FAX / E-MAIL ADDRESS

rcrooker@gmail.com

3. Office Sought or Held

OFFICE SOUGHT OR HELD

city Council

JURISDICTION (LOCATION)

City of Hughson

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

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

8-16-22

DATE

By

Randy Crooker

SIGNATURE OF OFFICEHOLDER OR CANDIDATE