

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

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CALIFORNIA FORM 470

AUG 20 2020

For Official Use Only

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

November 3, 2020

Amendment (Explain Below)

BY: *Julie Chustel*

1. Statement Covers Calendar Year 20 20 .

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Rouze' Roberts

STREET ADDRESS

CITY STATE ZIP CODE

Oakdale CA 95361

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

3. Office Sought or Held

OFFICE SOUGHT OR HELD

City Clerk

JURISDICTION (LOCATION) DISTRICT NUMBER (IF APPLICABLE)

City of Oakdale

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 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 August 18, 2020 DATE

By _____