

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

CALIFORNIA 470
FORM

For Official Use Only

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JUL 31 2018

CITY CLERK

Date Stamp

Date of election if applicable:
(Month, Day, Year)
11/6/2018

Amendment (Explain Below)

1. Statement Covers Calendar Year 20 18

2. Officerholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

TERESA A. ROSIAK

STREET ADDRESS

[REDACTED]

CITY

LEMON GROVE

STATE

CA

ZIP CODE

91945

AREA CODE/DAYTIME PHONE NUMBER

[REDACTED]

OPTIONAL FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Lemon Grove City Council

JURISDICTION (LOCATION)

San Diego - Lemon Grove

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 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 7/31/2018 DATE

By

* NO money rec'd and no contributions.
Teresa Rosiak