

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

Date of election if applicable: (Month, Day, Year) <b>NOV 5<sup>TH</sup> 2024</b>	<input checked="" type="checkbox"/> <b>Amendment</b> (Explain Below) <b>Opened Campaign committee 08/05/23<sup>rd</sup> 2023</b>	RECEIVED JAN 31 2024 CITY CLERK	CALIFORNIA FORM <b>470</b> For Official Use Only
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1. Statement Covers Calendar Year 20 23.

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE  
**PAUL AKINJO**

STREET ADDRESS  
[REDACTED]

CITY STATE ZIP CODE  
[REDACTED] CA 95330

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

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD  
**CITY OF WATKINS MAYOR**

JURISDICTION (LOCATION)  
**CITY OF WATKINS**

DISTRICT NUMBER (IF APPLICABLE)  
**N/A**

**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
<b>PAUL AKINJO FOR WATKINS MAYOR 2024</b>	<b>Watkins CA 95330</b>	<b>Paul Akinjo [REDACTED] CA 95330</b>

**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 per 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

Executed on 01/31/2024 DATE

By [REDACTED] SIGNATURE OF OFFICEHOLDER OR CANDIDATE