

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

(Government Code Section 84206)

Type or print in ink.

SHORT FORM

Date of election if applicable: (Month, Day, Year)  <u>June 5, 2012</u>	<input type="checkbox"/> Amendment (Explain Below)  _____ _____	SANTA CRUZ CO. ELECTIONS  12 APR -2 AM 10:05	Date Stamp FILED	CALIFORNIA FORM	470
			For Official Use Only		

1. Statement Covers Calendar Year 20 12 .

**2. Officeholder or Candidate Information**

NAME OF OFFICEHOLDER OR CANDIDATE

CHARLES PAWDEN

STREET ADDRESS

City

SANTA CRUZ

AREA CODE/DAYTIME PHONE NUMBER

831 462 3423

CA

STATE

95062

ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

**3. Office Sought or Held**

OFFICE SOUGHT OR HELD

Supervisor

JURISDICTION (LOCATION)

SANTA CRUZ CO

DISTRICT NUMBER  
(IF APPLICABLE)

1

**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 \$1,000 and that I will spend less than \$1,000 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 April 2, 2012  
DATE

By Charles Paulden  
SIGNATURE OF OFFICEHOLDER OR CANDIDATE