

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

**CALIFORNIA FORM 470**  
For Official Use Only

**RECEIVED**  
SEP 23 2024  
CITY CLERK'S OFFICE

Date of election if applicable: (Month, Day, Year)  
11-5-2024

Amendment (Explain Below)

1. Statement Covers Calendar Year 2024. 7-1-24 - 9-21-24

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE: Wendy Hewitt

STREET ADDRESS: 955 Roberts Rd

CITY: Calimesa STATE: CA ZIP CODE: 92320

AREA CODE/DAYTIME PHONE NUMBER: 909-709-8519 OPTIONAL: FAX / E-MAIL ADDRESS: whmaker2004@aol.com

OFFICE Sought OR HELD: City Council

JURISDICTION (LOCATION): Calimesa, CA

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
<u>1433781</u>	<u>955 Roberts Rd</u>	<u>Wendy Hewitt</u>
<u>Wendy Hewitt for City Council 2024</u>	<u>Calimesa, CA 92320</u>	

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 Sept. 18, 2024 DATE

By: Wendy Hewitt SIGNATURE OF OFFICEHOLDER OR CANDIDATE