7/23/22

Officeholder and Candidate

Campaign Statement – Short Form		LOS Z				LOSA	CEIV Palestamy IGELES COUNTY	CALIFORNIA 470
	,		lection if applicable: onth, Day, Year)	☐ Amen	dment (Explain Below)		L 26 PM 2: 55	For Official Use Only
		N/A				CAMP	AIGN FINANCE	
ı.	Statement Covers Calendar Year 20 22							
2.	Officeholder or Candidate Information			3.	Office Sought	t or Held		
	NAME OF OFFICEHOLDER OR CANDIDATE	- · · ·			OFFICE SOUGHT OR H	IELD		
	Danielt rutia				Governing B oa	ard f/ lember		
	STREET ADDRESS	-			JURISDICTION (LOCAT	ION)	,	DISTRICT NUMBER (IF APPLICABLE)
					Centinela ∀ alle	ey ∜ nion ∦ ig	h\$choolDistrict	(IF AFFEIGABLE)
	CITY	STATE	ZIP CODE	-				
	Lawndale	CA	90260					
	AREA CODE/DAYTIME PHONE NUMBER	OPTIONAL	FAX / E-MAIL ADDRESS					
	310#263#3202	danielu	ırrut@gmail.com					
I.	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	
								:
		,						
j.	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 all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of Califo							
	July \$1,\$022 Executed on				Ву			